

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Cigna Corporation Political Action Committee

ADDRESS (number and street)

601 Pennsylvania Avenue NW

South Building Suite 835

Washington

DC

20004

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00085316

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2014

through

M M M / D D D / Y Y Y Y Y Y
07 31 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Peter Sherman

Signature of Treasurer

Peter Sherman

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
08 18 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Cigna Corporation Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y Y 07 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		237988.38
(b) Cash on Hand at Beginning of Reporting Period.....	320388.23	
(c) Total Receipts (from Line 19)	48865.88	269440.73
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	369254.11	507429.11
7. Total Disbursements (from Line 31)	36800.00	174975.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	332454.11	332454.11
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Cigna Corporation Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	37075.13	161768.95
(ii) Unitemized	11790.75	107671.78
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	48865.88	269440.73
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	48865.88	269440.73
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	48865.88	269440.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	48865.88	269440.73

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	1225.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	1225.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33000.00	159000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	3800.00	14750.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	36800.00	174975.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36800.00	174975.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	48865.88	269440.73
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48865.88	269440.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	1225.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	1225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 241

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Anthony Abate

Mailing Address 69 Wildcat Road

City	State	Zip Code
Burlington	CT	06013

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Supply Chain Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	03	/	2014

Transaction ID : 20140630-17968-20-38

Amount of Each Receipt this Period

155.00

Full Name (Last, First, Middle Initial)

B. Anthony Abate

Mailing Address 69 Wildcat Road

City	State	Zip Code
Burlington	CT	06013

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Supply Chain Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2014

Transaction ID : 20140714-17906-20-38

Amount of Each Receipt this Period

155.00

Full Name (Last, First, Middle Initial)

C. Anthony Abate

Mailing Address 69 Wildcat Road

City	State	Zip Code
Burlington	CT	06013

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Supply Chain Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : 20140728-17847-20-24

Amount of Each Receipt this Period

155.00

SUBTOTAL of Receipts This Page (optional)..... ►

465.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Linda A. Adamsons

Mailing Address 33 Belle Vista Heights

City State Zip Code
 Portland CT 06480

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-1027-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Linda A. Adamsons

Mailing Address 33 Belle Vista Heights

City State Zip Code
 Portland CT 06480

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-1022-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Linda A. Adamsons

Mailing Address 33 Belle Vista Heights

City State Zip Code
 Portland CT 06480

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-1020-20-24

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

45.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Melissa Ahmann-Tucker

Mailing Address 1108 Rombauer Drive

City State Zip Code
Franklin TN 37067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Actuarial Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-30840-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Melissa Ahmann-Tucker

Mailing Address 1108 Rombauer Drive

City State Zip Code
Franklin TN 37067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Actuarial Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-30935-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Melissa Ahmann-Tucker

Mailing Address 1108 Rombauer Drive

City State Zip Code
Franklin TN 37067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Actuarial Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-30946-20-24

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Marc M. Alcedo

Mailing Address 1729 Canonero Drive

City State Zip Code
 Austin TX 78746

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-22303-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Marc M. Alcedo

Mailing Address 1729 Canonero Drive

City State Zip Code
 Austin TX 78746

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-22227-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Marc M. Alcedo

Mailing Address 1729 Canonero Drive

City State Zip Code
 Austin TX 78746

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-22130-20-24

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael B. Alexander

Mailing Address 128 East 15th Street

City State Zip Code
Ship Bottom NJ 08008

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 03 2014

Transaction ID : 20140630-11201-20-38

Amount of Each Receipt this Period

26.93

Full Name (Last, First, Middle Initial)

B. Michael B. Alexander

Mailing Address 128 East 15th Street

City State Zip Code
Ship Bottom NJ 08008

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 17 2014

Transaction ID : 20140714-11170-20-38

Amount of Each Receipt this Period

26.93

Full Name (Last, First, Middle Initial)

C. Michael B. Alexander

Mailing Address 128 East 15th Street

City State Zip Code
Ship Bottom NJ 08008

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 31 2014

Transaction ID : 20140728-11146-20-24

Amount of Each Receipt this Period

26.93

SUBTOTAL of Receipts This Page (optional)..... ►

80.79

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gregory J. Allen

Mailing Address 9510 Eldwick Drive

City State Zip Code
 Brentwood TN 37027

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-30122-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Gregory J. Allen

Mailing Address 9510 Eldwick Drive

City State Zip Code
 Brentwood TN 37027

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-30220-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Gregory J. Allen

Mailing Address 9510 Eldwick Drive

City State Zip Code
 Brentwood TN 37027

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-30236-20-24

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Raegan M. Armata

Mailing Address 19 Usher Ave

City

Plainville

State

CT

Zip Code

06062

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Marketing Product Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-208-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Raegan M. Armata

Mailing Address 19 Usher Ave

City

Plainville

State

CT

Zip Code

06062

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Marketing Product Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-207-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Raegan M. Armata

Mailing Address 19 Usher Ave

City

Plainville

State

CT

Zip Code

06062

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Marketing Product Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-207-20-24

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ann H. Asbaty

Mailing Address 3 Huntington Dr

City

Randolph

State

NJ

Zip Code

07869

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-316-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Ann H. Asbaty

Mailing Address 3 Huntington Dr

City

Randolph

State

NJ

Zip Code

07869

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-314-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Ann H. Asbaty

Mailing Address 3 Huntington Dr

City

Randolph

State

NJ

Zip Code

07869

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-314-20-24

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jacquelyn A. Aube

Mailing Address 166 Wildflower Cir

City

Westfield

State

MA

Zip Code

01085

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Product Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-1686-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Jacquelyn A. Aube

Mailing Address 166 Wildflower Cir

City

Westfield

State

MA

Zip Code

01085

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Product Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-1679-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Jacquelyn A. Aube

Mailing Address 166 Wildflower Cir

City

Westfield

State

MA

Zip Code

01085

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Product Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-1675-20-24

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. James Austin

Mailing Address 394 W Remington Dr

City State Zip Code
 Chandler AZ 85286

FEC ID number of contributing federal political committee.

C

Name of Employer
 Cigna HEALTHCARE OF AZ, INC

Occupation
 Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-5036-20-38

Amount of Each Receipt this Period

46.87

Full Name (Last, First, Middle Initial)

B. James Austin

Mailing Address 394 W Remington Dr

City State Zip Code
 Chandler AZ 85286

FEC ID number of contributing federal political committee.

C

Name of Employer
 Cigna HEALTHCARE OF AZ, INC

Occupation
 Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-5017-20-38

Amount of Each Receipt this Period

46.93

Full Name (Last, First, Middle Initial)

C. James Austin

Mailing Address 394 W Remington Dr

City State Zip Code
 Chandler AZ 85286

FEC ID number of contributing federal political committee.

C

Name of Employer
 Cigna HEALTHCARE OF AZ, INC

Occupation
 Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-5008-20-24

Amount of Each Receipt this Period

59.31

SUBTOTAL of Receipts This Page (optional)..... ►

153.11

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sanjiv Awasthi

Mailing Address 5 Scarborough Road

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Corporate Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : 20140630-20683-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Sanjiv Awasthi

Mailing Address 5 Scarborough Road

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Corporate Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : 20140714-20607-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Sanjiv Awasthi

Mailing Address 5 Scarborough Road

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Corporate Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : 20140728-20529-20-24

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

45.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 17 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lisa R. Bacus

Mailing Address 188 Northington Drive

City State Zip Code
 Avon CT 06001

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Chief Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2464.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-24886-20-38

Amount of Each Receipt this Period

154.00

Full Name (Last, First, Middle Initial)

B. Lisa R. Bacus

Mailing Address 188 Northington Drive

City State Zip Code
 Avon CT 06001

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Chief Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2464.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-24810-20-38

Amount of Each Receipt this Period

154.00

Full Name (Last, First, Middle Initial)

C. Lisa R. Bacus

Mailing Address 188 Northington Drive

City State Zip Code
 Avon CT 06001

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Chief Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2464.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-24682-20-24

Amount of Each Receipt this Period

154.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

462.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gary A. Bailey

Mailing Address 6043 Red Clover Lane

City State Zip Code
 Clarksville MD 21029

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-31014-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Gary A. Bailey

Mailing Address 6043 Red Clover Lane

City State Zip Code
 Clarksville MD 21029

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-31106-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Gary A. Bailey

Mailing Address 6043 Red Clover Lane

City State Zip Code
 Clarksville MD 21029

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-31116-20-24

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

300.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 19 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark Bailey

Mailing Address 4629 Penbrook Ct

City State Zip Code
 Plano TX 75024

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Direct Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-11079-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mark Bailey

Mailing Address 4629 Penbrook Ct

City State Zip Code
 Plano TX 75024

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Direct Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-11048-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mark Bailey

Mailing Address 4629 Penbrook Ct

City State Zip Code
 Plano TX 75024

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Direct Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-11025-20-24

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Amie L. Benedict

Mailing Address 115 Bobolink Lane

City State Zip Code
 Somers CT 06071

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-6940-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Amie L. Benedict

Mailing Address 115 Bobolink Lane

City State Zip Code
 Somers CT 06071

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-6914-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Amie L. Benedict

Mailing Address 115 Bobolink Lane

City State Zip Code
 Somers CT 06071

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-6897-20-24

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Amy R. Bennett

Mailing Address 77 Harmony Hill Rd

City State Zip Code
 Granby CT 06035

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-1543-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Amy R. Bennett

Mailing Address 77 Harmony Hill Rd

City State Zip Code
 Granby CT 06035

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-1537-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. Amy R. Bennett

Mailing Address 77 Harmony Hill Rd

City State Zip Code
 Granby CT 06035

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-1535-20-24

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 241

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeff Berardo

Mailing Address 251 Alberta Dr

City

Saddle Brook

State

NJ

Zip Code

07663

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Director-Direct Sales

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-2054-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Jeff Berardo

Mailing Address 251 Alberta Dr

City

Saddle Brook

State

NJ

Zip Code

07663

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Director-Direct Sales

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-2044-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Jeff Berardo

Mailing Address 251 Alberta Dr

City

Saddle Brook

State

NJ

Zip Code

07663

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Director-Direct Sales

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-2039-20-24

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jodi M. Berry

Mailing Address 179 McIntosh Circle

City State Zip Code
 Jackson GA 30233

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.88

Date of Receipt

MM / DD / YYYY
 07 / 31 / 2014

Transaction ID : 20140728-6337-20-24

Amount of Each Receipt this Period

7.31

Full Name (Last, First, Middle Initial)

B. Kim Bimestefer

Mailing Address 9832 Paperflower Drive

City State Zip Code
 Parker CO 80138

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : 20140630-7953-20-38

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

C. Kim Bimestefer

Mailing Address 9832 Paperflower Drive

City State Zip Code
 Parker CO 80138

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

MM / DD / YYYY
 07 / 17 / 2014

Transaction ID : 20140714-7927-20-38

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

187.31

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kim Bimestefer

Mailing Address 9832 Paperflower Drive

City State Zip Code
Parker CO 80138

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : 20140728-7908-20-24

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

B. John J. Bogan

Mailing Address 1722 Mt. Pleasant Rd.

City State Zip Code
Havertown PA 19083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : 20140630-22676-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. John J. Bogan

Mailing Address 1722 Mt. Pleasant Rd.

City State Zip Code
Havertown PA 19083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : 20140714-22597-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John J. Bogan

Mailing Address 1722 Mt. Pleasant Rd.

City State Zip Code
Havertown PA 19083

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-22496-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Diane M. Botticello

Mailing Address 43 Bugbee Rd

City State Zip Code
Southwick MA 01077

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-1764-20-38

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

C. Diane M. Botticello

Mailing Address 43 Bugbee Rd

City State Zip Code
Southwick MA 01077

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-1756-20-38

Amount of Each Receipt this Period

19.25

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

88.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Diane M. Botticello

Mailing Address 43 Bugbee Rd

City

Southwick

State

MA

Zip Code

01077

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-1752-20-24

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

B. Mark L. Boxer

Mailing Address 35 Partridge Lndg

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

EVP CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-9154-20-38

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

C. Mark L. Boxer

Mailing Address 35 Partridge Lndg

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

EVP CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-9130-20-38

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)..... ►

403.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark L. Boxer

Mailing Address 35 Partridge Lndg

City State Zip Code
 Glastonbury CT 06033

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 EVP CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-9109-20-24

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. Brett C. Browchuk

Mailing Address 385 Deercliff Road

City State Zip Code
 Avon CT 06001

FEC ID number of contributing federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 SVP Service Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-12790-20-38

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

c. Brett C. Browchuk

Mailing Address 385 Deercliff Road

City State Zip Code
 Avon CT 06001

FEC ID number of contributing federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 SVP Service Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-12753-20-38

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)..... ►

576.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brett C. Browchuk

Mailing Address 385 Deercliff Road

City State Zip Code
 Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

SVP Service Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

MM / DD / YYYY
 07 / 31 / 2014

Transaction ID : 20140728-12724-20-24

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. William Brown

Mailing Address 931 Manassas Drive

City State Zip Code
 Hixson TN 37343

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : 20140630-8033-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. William Brown

Mailing Address 931 Manassas Drive

City State Zip Code
 Hixson TN 37343

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
 07 / 17 / 2014

Transaction ID : 20140714-8007-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

242.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. William Brown

Mailing Address 931 Manassas Drive

City

Hixson

State

TN

Zip Code

37343

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-7988-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Kelly K. Brundin

Mailing Address 610 Meadowview Ct

City

Maple Glen

State

PA

Zip Code

19002

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Financial Plng & Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-2950-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Kelly K. Brundin

Mailing Address 610 Meadowview Ct

City

Maple Glen

State

PA

Zip Code

19002

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Financial Plng & Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-2939-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kelly K. Brundin

Mailing Address 610 Meadowview Ct

City

Maple Glen

State

PA

Zip Code

19002

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Financial Plng & Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-2934-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Zigmund R. Brzezinski

Mailing Address 801 Ocean Rd

City

Spring Lake

State

NJ

Zip Code

07762

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.03

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-2511-20-38

Amount of Each Receipt this Period

16.98

Full Name (Last, First, Middle Initial)

c. Zigmund R. Brzezinski

Mailing Address 801 Ocean Rd

City

Spring Lake

State

NJ

Zip Code

07762

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.03

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-2501-20-38

Amount of Each Receipt this Period

17.04

SUBTOTAL of Receipts This Page (optional)..... ►

84.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Zigmund R. Brzezinski

Mailing Address 801 Ocean Rd

City

Spring Lake

State

NJ

Zip Code

07762

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

271.03

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-2496-20-24

Amount of Each Receipt this Period

16.98

Full Name (Last, First, Middle Initial)

B. M. Buckley

Mailing Address 3651 N Leavitt St

City

Chicago

State

IL

Zip Code

60618

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Manager Account Mgmt

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

564.70

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-4219-20-38

Amount of Each Receipt this Period

12.04

Full Name (Last, First, Middle Initial)

C. M. Buckley

Mailing Address 3651 N Leavitt St

City

Chicago

State

IL

Zip Code

60618

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Manager Account Mgmt

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

564.70

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-4202-20-38

Amount of Each Receipt this Period

12.10

SUBTOTAL of Receipts This Page (optional)..... ►

41.12

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. M. Buckley

Mailing Address 3651 N Leavitt St

City
ChicagoState
ILZip Code
60618FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Manager Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

564.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-4194-20-24

Amount of Each Receipt this Period

12.04

Full Name (Last, First, Middle Initial)

B. Timothy D. Buckley

Mailing Address 611 Shipton Lane

City

Bryn Mawr

State

PA

Zip Code

19010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Internation

Occupation

VP Treasury

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-12589-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. Timothy D. Buckley

Mailing Address 611 Shipton Lane

City

Bryn Mawr

State

PA

Zip Code

19010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Internation

Occupation

VP Treasury

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-12553-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

112.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Timothy D. Buckley

Mailing Address 611 Shipton Lane

City State Zip Code
 Bryn Mawr PA 19010

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Internation

Occupation

VP Treasury

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-12525-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Glenn T. Butkus

Mailing Address 6 Front Street

City State Zip Code
 Hopkinton MA 01748

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Sales Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-342-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

c. Glenn T. Butkus

Mailing Address 6 Front Street

City State Zip Code
 Hopkinton MA 01748

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Sales Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-340-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Glenn T. Butkus

Mailing Address 6 Front Street

City

Hopkinton

State

MA

Zip Code

01748

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Sales Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : 20140728-340-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mark Butler

Mailing Address 7 Mathieu Dr

City

Westborough

State

MA

Zip Code

01581

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : 20140630-8765-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Mark Butler

Mailing Address 7 Mathieu Dr

City

Westborough

State

MA

Zip Code

01581

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : 20140714-8739-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark Butler

Mailing Address 7 Mathieu Dr

City State Zip Code
 Westborough MA 01581

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-8716-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Vanda Campbell

Mailing Address 600 12th Ave S

City State Zip Code
 Nashville TN 37203

FEC ID number of contributing federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-30170-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Vanda Campbell

Mailing Address 600 12th Ave S

City State Zip Code
 Nashville TN 37203

FEC ID number of contributing federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-30268-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Vanda Campbell

Mailing Address 600 12th Ave S

City

Nashville

State

TN

Zip Code

37203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-30284-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Karen M. Cantelmo

Mailing Address 46 Sunset Hill Rd

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Provider Contracting Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-4258-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Karen M. Cantelmo

Mailing Address 46 Sunset Hill Rd

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Provider Contracting Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-4241-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 37 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Karen M. Cantelmo

Mailing Address 46 Sunset Hill Rd

City
Simsbury

State
CT

Zip Code
06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-4233-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. John S. Cantrell

Mailing Address 415 Spanish Moss Court

City
Coppell

State
TX

Zip Code
75019

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Corporate Security Sr Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-5255-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

c. John S. Cantrell

Mailing Address 415 Spanish Moss Court

City
Coppell

State
TX

Zip Code
75019

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Corporate Security Sr Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-5235-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John S. Cantrell

Mailing Address 415 Spanish Moss Court

City State Zip Code
Coppell TX 75019

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AMERICA

Occupation
Corporate Security Sr Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : 20140728-5226-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Wendy L. Carberg

Mailing Address 14 Nowakowski Road

City State Zip Code
Griswold CT 06351

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : 20140630-897-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Wendy L. Carberg

Mailing Address 14 Nowakowski Road

City State Zip Code
Griswold CT 06351

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : 20140714-892-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Wendy L. Carberg

Mailing Address 14 Nowakowski Road

City State Zip Code
 Griswold CT 06351

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-891-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. William C. Carlson

Mailing Address 70 Waterside Lane

City State Zip Code
 West Hartford CT 06107

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Real Estate Sr Managing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-691-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. William C. Carlson

Mailing Address 70 Waterside Lane

City State Zip Code
 West Hartford CT 06107

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Real Estate Sr Managing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-686-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. William C. Carlson

Mailing Address 70 Waterside Lane

City State Zip Code
 West Hartford CT 06107

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Real Estate Sr Managing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-684-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Steven Caron

Mailing Address 237 Tall Pines Dr

City State Zip Code
 Sewell NJ 08080

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-2049-20-38

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Steven Caron

Mailing Address 237 Tall Pines Dr

City State Zip Code
 Sewell NJ 08080

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-2039-20-38

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

85.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steven Caron

Mailing Address 237 Tall Pines Dr

City State Zip Code
 Sewell NJ 08080

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-2034-20-24

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Michelle L. Cavner

Mailing Address 3085 E Cardinal Ct

City State Zip Code
 Chandler AZ 85286

FEC ID number of contributing federal political committee.

C

Name of Employer
 CIGNA HEALTHCARE OF AZ, INC

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-5566-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. Michelle L. Cavner

Mailing Address 3085 E Cardinal Ct

City State Zip Code
 Chandler AZ 85286

FEC ID number of contributing federal political committee.

C

Name of Employer
 CIGNA HEALTHCARE OF AZ, INC

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-5546-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

130.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michelle L. Cavner

Mailing Address 3085 E Cardinal Ct

City State Zip Code
 Chandler AZ 85286

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CIGNA HEALTHCARE OF AZ, INC

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-5535-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Frank H. Cisz

Mailing Address 298 Swain Ave.

City State Zip Code
 Meriden CT 06450

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-13450-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Frank H. Cisz

Mailing Address 298 Swain Ave.

City State Zip Code
 Meriden CT 06450

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-13407-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Frank H. Cisz

Mailing Address 298 Swain Ave.

City State Zip Code
 Meriden CT 06450

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-13373-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Robert F. Clark

Mailing Address 15 Bantry Rd

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Coli

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-371-20-38

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

c. Robert F. Clark

Mailing Address 15 Bantry Rd

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Coli

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-368-20-38

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)..... ►

205.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert F. Clark

Mailing Address 15 Bantry Rd

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Coli

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-367-20-24

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

B. Debra P. Cody

Mailing Address 9 HOLCOMB STREET

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Information Protection Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-18548-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. Debra P. Cody

Mailing Address 9 HOLCOMB STREET

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Information Protection Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-18484-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Debra P. Cody

Mailing Address 9 HOLCOMB STREET

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Information Protection Sr Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-18424-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Gina L. Collins

Mailing Address 99 Charolais Way

City

Burlington

State

CT

Zip Code

06013

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-10546-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Gina L. Collins

Mailing Address 99 Charolais Way

City

Burlington

State

CT

Zip Code

06013

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-10516-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gina L. Collins

Mailing Address 99 Charolais Way

City
Burlington

State
CT

Zip Code
06013

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : 20140728-10493-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Timothy K. Conners

Mailing Address 786 NORTH VALLEY FORGE ROAD

City
Devon

State
PA

Zip Code
19333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : 20140630-20484-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Timothy K. Conners

Mailing Address 786 NORTH VALLEY FORGE ROAD

City
Devon

State
PA

Zip Code
19333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : 20140714-20410-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Timothy K. Conners

Mailing Address 786 NORTH VALLEY FORGE ROAD

City State Zip Code
 Devon PA 19333

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-20334-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Michael Conrad

Mailing Address 1724 N. Poinsettia Ave.

City State Zip Code
 Manhattan Beach CA 90266

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager-National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1177.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-2127-20-38

Amount of Each Receipt this Period

9.26

Full Name (Last, First, Middle Initial)

c. Michael Conrad

Mailing Address 1724 N. Poinsettia Ave.

City State Zip Code
 Manhattan Beach CA 90266

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager-National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1177.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-2117-20-38

Amount of Each Receipt this Period

9.32

SUBTOTAL of Receipts This Page (optional)..... ►

68.58

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 48 OF 241
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael Conrad

Mailing Address 1724 N. Poinsettia Ave.

City State Zip Code
 Manhattan Beach CA 90266

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager-National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1177.05

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-2112-20-24

Amount of Each Receipt this Period

9.26

Full Name (Last, First, Middle Initial)

B. Eric P. Consolazio

Mailing Address 7 Stonefield Court

City State Zip Code
 Cortlandt Manor NY 10567

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-1700-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Eric P. Consolazio

Mailing Address 7 Stonefield Court

City State Zip Code
 Cortlandt Manor NY 10567

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-1693-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

209.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eric P. Consolazio

Mailing Address 7 Stonefield Court

City State Zip Code
 Cortlandt Manor NY 10567

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-1689-20-24

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Joshua Cook

Mailing Address 8170 Steeplechase Circle

City State Zip Code
 Argyle TX 76226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
HS Network Opns Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-31965-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Joshua Cook

Mailing Address 8170 Steeplechase Circle

City State Zip Code
 Argyle TX 76226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

HS Network Opns Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-32051-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joshua Cook

Mailing Address 8170 Steeplechase Circle

City State Zip Code
 Argyle TX 76226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

HS Network Opns Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
 07 / 31 / 2014

Transaction ID : 20140728-32055-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. David M. Cordani

Mailing Address 32 Lucy Way

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : 20140630-444-20-38

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

C. David M. Cordani

Mailing Address 32 Lucy Way

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

MM / DD / YYYY
 07 / 17 / 2014

Transaction ID : 20140714-440-20-38

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

434.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David M. Cordani

Mailing Address 32 Lucy Way

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-439-20-24

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. Wesley Cowen

Mailing Address 1853 Dart St

City State Zip Code
 Houston TX 77007

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Manager Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-21196-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Wesley Cowen

Mailing Address 1853 Dart St

City State Zip Code
 Houston TX 77007

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Manager Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-21117-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

232.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Wesley Cowen

Mailing Address 1853 Dart St

City State Zip Code
Houston TX 77007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Manager Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-21027-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Daniel J. Cozzo

Mailing Address 31792 Via Coyote

City State Zip Code
Coto de Caza CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-9894-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Daniel J. Cozzo

Mailing Address 31792 Via Coyote

City State Zip Code
Coto de Caza CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-9866-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Daniel J. Cozzo

Mailing Address 31792 Via Coyote

City State Zip Code
Coto de Caza CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AMERICA

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-9844-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Stephen W. Crawford

Mailing Address 216 B Avenue

City State Zip Code
Coronado CA 92118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-12384-20-38

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

C. Stephen W. Crawford

Mailing Address 216 B Avenue

City State Zip Code
Coronado CA 92118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-12348-20-38

Amount of Each Receipt this Period

19.25

SUBTOTAL of Receipts This Page (optional)..... ►

88.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Stephen W. Crawford

Mailing Address 216 B Avenue

City State Zip Code
 Coronado CA 92118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-12320-20-24

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

B. Rebecca A. Croes

Mailing Address 16210 Bradford Shores Drive

City State Zip Code
 Cypress TX 77433

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-31151-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Rebecca A. Croes

Mailing Address 16210 Bradford Shores Drive

City State Zip Code
 Cypress TX 77433

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-31243-20-38

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

169.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rebecca A. Croes

Mailing Address 16210 Bradford Shores Drive

City State Zip Code
Cypress TX 77433

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 31 2014

Transaction ID : 20140728-31253-20-24

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Andrew D. Crooks

Mailing Address 323 Turtle Trl

City State Zip Code
Lake Mary FL 32746

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 03 2014

Transaction ID : 20140630-7832-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Andrew D. Crooks

Mailing Address 323 Turtle Trl

City State Zip Code
Lake Mary FL 32746

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 17 2014

Transaction ID : 20140714-7806-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Andrew D. Crooks

Mailing Address 323 Turtle Trl

City State Zip Code
 Lake Mary FL 32746

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-7788-20-24

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Brian Cuddeback

Mailing Address 2 Old Wheeler Ln

City State Zip Code
 Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-11101-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Brian Cuddeback

Mailing Address 2 Old Wheeler Ln

City State Zip Code
 Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-11070-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brian Cuddeback

Mailing Address 2 Old Wheeler Ln

City State Zip Code
 Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-11046-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Donald M. Curry

Mailing Address 4 Sylvan Lane

City State Zip Code
 Cumberland Foresid ME 04110

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-9530-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

c. Donald M. Curry

Mailing Address 4 Sylvan Lane

City State Zip Code
 Cumberland Foresid ME 04110

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-9503-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 58 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Donald M. Curry

Mailing Address 4 Sylvan Lane

City State Zip Code
 Cumberland Foresid ME 04110

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-9482-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Gregory J. Czar

Mailing Address 116 Rebecca Drive

City State Zip Code
 Downingtown PA 19335

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AMERICA

Occupation
Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-9281-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

c. Gregory J. Czar

Mailing Address 116 Rebecca Drive

City State Zip Code
 Downingtown PA 19335

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AMERICA

Occupation
Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-9258-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

70.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 59 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gregory J. Czar

Mailing Address 116 Rebecca Drive

City State Zip Code
Downingtown PA 19335

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AMERICA

Occupation
Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-9237-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Kristin Damato

Mailing Address 2610 John Marshall Drive North

City State Zip Code
Arlington VA 22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
Government Affairs Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-2313-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Kristin Damato

Mailing Address 2610 John Marshall Drive North

City State Zip Code
Arlington VA 22207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
Government Affairs Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-2303-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kristin Damato

Mailing Address 2610 John Marshall Drive North

City State Zip Code
Arlington VA 22207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : 20140728-2298-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Robert L. Dawson

Mailing Address 2450 Seabrook Island Road

City State Zip Code
Johns Island SC 29455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2720.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : 20140630-31413-20-38

Amount of Each Receipt this Period

170.00

Full Name (Last, First, Middle Initial)

C. Robert L. Dawson

Mailing Address 2450 Seabrook Island Road

City State Zip Code
Johns Island SC 29455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2720.00

Date of Receipt

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : 20140714-31504-20-38

Amount of Each Receipt this Period

170.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

390.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert L. Dawson

Mailing Address 2450 Seabrook Island Road

City State Zip Code
 Johns Island SC 29455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-31511-20-24

Amount of Each Receipt this Period

170.00

Full Name (Last, First, Middle Initial)

B. Johannes M. De Jong

Mailing Address 6122 Mccallum St

City State Zip Code
 Philadelphia PA 19144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-226-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Johannes M. De Jong

Mailing Address 6122 Mccallum St

City State Zip Code
 Philadelphia PA 19144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-224-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Johannes M. De Jong

Mailing Address 6122 Mccallum St

City State Zip Code
Philadelphia PA 19144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-224-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Christopher De Rosa

Mailing Address 7216 E Magdalena Dr

City State Zip Code
Orange CA 92867

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-1596-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Christopher De Rosa

Mailing Address 7216 E Magdalena Dr

City State Zip Code
Orange CA 92867

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-1590-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Christopher De Rosa

Mailing Address 7216 E Magdalena Dr

City State Zip Code
 Orange CA 92867

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-1588-20-24

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. John R. DeFeo

Mailing Address 31 Deverell Dr

City State Zip Code
 North Barrington IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-18939-20-38

Amount of Each Receipt this Period

135.00

Full Name (Last, First, Middle Initial)

c. John R. DeFeo

Mailing Address 31 Deverell Dr

City State Zip Code
 North Barrington IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-18874-20-38

Amount of Each Receipt this Period

135.00

SUBTOTAL of Receipts This Page (optional)..... ►

370.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John R. DeFeo

Mailing Address 31 Deverell Dr

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-18810-20-24

Amount of Each Receipt this Period

135.00

Full Name (Last, First, Middle Initial)

B. Elizabeth DeForest

Mailing Address 53 Fairfield Avenue

City

Chicopee

State

MA

Zip Code

01013

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Audit Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-9158-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Elizabeth DeForest

Mailing Address 53 Fairfield Avenue

City

Chicopee

State

MA

Zip Code

01013

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Audit Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-9134-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Elizabeth DeForest

Mailing Address 53 Fairfield Avenue

City
Chicopee

State
MA

Zip Code
01013

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Audit Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-9113-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Mary DeNicola

Mailing Address 575 Aberdeen Rd

City
Frankfort

State
IL

Zip Code
60423

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-9342-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

c. Mary DeNicola

Mailing Address 516 Rhythm

City
Irvine

State
CA

Zip Code
92603

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-9319-20-38

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mary DeNicola

Mailing Address 516 Rhythm

City State Zip Code
Irvine CA 92603

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-9298-20-24

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Edwin J. Detrick

Mailing Address 17 Swallow Rd

City State Zip Code
Holland PA 18966

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
VP Investor Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-2393-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Edwin J. Detrick

Mailing Address 17 Swallow Rd

City State Zip Code
Holland PA 18966

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
VP Investor Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-2383-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Edwin J. Detrick

Mailing Address 17 Swallow Rd

City State Zip Code
Holland PA 18966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Investor Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-2378-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Brendan J. Devine

Mailing Address 116 N Fairfax Street

City State Zip Code
Falls Church VA 22046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-26371-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Brendan J. Devine

Mailing Address 116 N Fairfax Street

City State Zip Code
Falls Church VA 22046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-26286-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brendan J. Devine

Mailing Address 116 N Fairfax Street

City State Zip Code
 Falls Church VA 22046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-26147-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Constance J. DiManno

Mailing Address 26 Newport Avenue

City State Zip Code
 West Hartford CT 06107

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-9659-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Constance J. DiManno

Mailing Address 26 Newport Avenue

City State Zip Code
 West Hartford CT 06107

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-9631-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Constance J. DiManno

Mailing Address 26 Newport Avenue

City State Zip Code
 West Hartford CT 06107

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-9609-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Jeannine Doherty

Mailing Address 1901 E Royal Palm Rd

City State Zip Code
 Phoenix AZ 85020

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.59

Date of Receipt

M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-27-20-38

Amount of Each Receipt this Period

7.32

Full Name (Last, First, Middle Initial)

C. Jeannine Doherty

Mailing Address 1901 E Royal Palm Rd

City State Zip Code
 Phoenix AZ 85020

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.59

Date of Receipt

M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-27-20-38

Amount of Each Receipt this Period

7.51

SUBTOTAL of Receipts This Page (optional)..... ►

64.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeannine Doherty

Mailing Address 1901 E Royal Palm Rd

City State Zip Code
 Phoenix AZ 85020

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-27-20-24

Amount of Each Receipt this Period

6.94

Full Name (Last, First, Middle Initial)

B. Eugene H. Dours

Mailing Address 11211 Rosser Road

City State Zip Code
 Dallas TX 75229

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-5179-20-38

Amount of Each Receipt this Period

18.50

Full Name (Last, First, Middle Initial)

C. Eugene H. Dours

Mailing Address 11211 Rosser Road

City State Zip Code
 Dallas TX 75229

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-5159-20-38

Amount of Each Receipt this Period

18.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

43.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eugene H. Dours

Mailing Address 11211 Rosser Road

City State Zip Code
 Dallas TX 75229

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

MM / DD / YYYY
 07 / 31 / 2014

Transaction ID : 20140728-5150-20-24

Amount of Each Receipt this Period

18.50

Full Name (Last, First, Middle Initial)

B. Michael D. Elmore

Mailing Address 3 Lydia Road

City State Zip Code
 Unionville CT 06085

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : 20140630-19500-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Michael D. Elmore

Mailing Address 3 Lydia Road

City State Zip Code
 Unionville CT 06085

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

MM / DD / YYYY
 07 / 17 / 2014

Transaction ID : 20140714-19432-20-38

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

168.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael D. Elmore

Mailing Address 3 Lydia Road

City

Unionville

State

CT

Zip Code

06085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-19361-20-24

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Scott E. Evelyn

Mailing Address 18 W 48th Street PHA

City

New York

State

NY

Zip Code

10036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-14035-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Scott E. Evelyn

Mailing Address 18 W 48th Street PHA

City

New York

State

NY

Zip Code

10036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-13992-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Scott E. Evelyn

Mailing Address 18 W 48th Street PHA

City
New York

State Zip Code
NY 10036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-13953-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Beverly J. Everett

Mailing Address 8228 Academy Rd

City
Ellicott City

State Zip Code
MD 21043

FEC ID number of contributing
federal political committee.

C

Name of Employer

INT'L REHAB. ASSOCIATES, INC.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-108-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

c. Beverly J. Everett

Mailing Address 8228 Academy Rd

City
Ellicott City

State Zip Code
MD 21043

FEC ID number of contributing
federal political committee.

C

Name of Employer

INT'L REHAB. ASSOCIATES, INC.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-107-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Beverly J. Everett

Mailing Address 8228 Academy Rd

City State Zip Code
 Ellicott City MD 21043

FEC ID number of contributing
federal political committee.

C

Name of Employer
 INT'L REHAB. ASSOCIATES, INC.

Occupation
 Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-107-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Kimberly A. Feltovic

Mailing Address 3 Scarborough Road

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-11297-20-38

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

c. Kimberly A. Feltovic

Mailing Address 3 Scarborough Road

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-11266-20-38

Amount of Each Receipt this Period

19.25

SUBTOTAL of Receipts This Page (optional)..... ►

58.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kimberly A. Feltovic

Mailing Address 3 Scarborough Road

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Account Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-11241-20-24

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

B. Staci F. Fernandez

Mailing Address 15 Dilaj Dr

City

Columbia

State

CT

Zip Code

06237

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business Project Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-1820-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Staci F. Fernandez

Mailing Address 15 Dilaj Dr

City

Columbia

State

CT

Zip Code

06237

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business Project Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-1811-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

59.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Staci F. Fernandez

Mailing Address 15 Dilaj Dr

City
Columbia

State
CT

Zip Code
06237

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business Project Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-1806-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Scott M. Filiault

Mailing Address 135 Timrod Rd

City
Manchester

State
CT

Zip Code
06040

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Informatics Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-235-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Scott M. Filiault

Mailing Address 135 Timrod Rd

City
Manchester

State
CT

Zip Code
06040

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Informatics Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-233-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Scott M. Filiault

Mailing Address 135 Timrod Rd

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Informatics Senior Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-233-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. David H. Finley

Mailing Address 134 Hillair Circle

City

White Plains

State

NY

Zip Code

10605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-18757-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. David H. Finley

Mailing Address 134 Hillair Circle

City

White Plains

State

NY

Zip Code

10605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-18692-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David H. Finley

Mailing Address 134 Hillair Circle

City State Zip Code
 White Plains NY 10605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-18630-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Susan P. Fitzpatrick

Mailing Address 116 E Walnut St

City State Zip Code
 Long Beach NY 11561

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-1593-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Susan P. Fitzpatrick

Mailing Address 116 E Walnut St

City State Zip Code
 Long Beach NY 11561

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-1587-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Susan P. Fitzpatrick

Mailing Address 116 E Walnut St

City State Zip Code
 Long Beach NY 11561

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-1585-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Brett L. Fleisher

Mailing Address 120 Forest Lane

City State Zip Code
 Glastonbury CT 06033

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Project Management Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-9338-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Brett L. Fleisher

Mailing Address 120 Forest Lane

City State Zip Code
 Glastonbury CT 06033

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Project Management Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-9315-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brett L. Fleisher

Mailing Address 120 Forest Lane

City State Zip Code
 Glastonbury CT 06033

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Project Management Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-9294-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mark Foulke

Mailing Address 105 Saltwood Place

City State Zip Code
 Hendersonville TN 37075

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
HS Network Opns Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-31286-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mark Foulke

Mailing Address 105 Saltwood Place

City State Zip Code
 Hendersonville TN 37075

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
HS Network Opns Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-31377-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark Foulke

Mailing Address 105 Saltwood Place

City State Zip Code
Hendersonville TN 37075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

HS Network Opns Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-31386-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mark R. Fricker

Mailing Address 4 Munson Drive

City State Zip Code
Pompton Plains NJ 07444

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-18772-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Mark R. Fricker

Mailing Address 4 Munson Drive

City State Zip Code
Pompton Plains NJ 07444

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-18707-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark R. Fricker

Mailing Address 4 Munson Drive

City State Zip Code
 Pompton Plains NJ 07444

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-18645-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Robert S. Fry

Mailing Address 1004 Beech Bay Rd

City State Zip Code
 Poplar Grove IL 61065

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-2696-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Robert S. Fry

Mailing Address 1004 Beech Bay Rd

City State Zip Code
 Poplar Grove IL 61065

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-2686-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert S. Fry

Mailing Address 1004 Beech Bay Rd

City State Zip Code
 Poplar Grove IL 61065

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-2682-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Peter R. Gardner

Mailing Address 3619 Star Light Ct

City State Zip Code
 Spring TX 77386

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-31095-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Peter R. Gardner

Mailing Address 3619 Star Light Ct

City State Zip Code
 Spring TX 77386

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-31187-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Peter R. Gardner

Mailing Address 3619 Star Light Ct

City State Zip Code
Spring TX 77386

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-31197-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Thomas Garvey

Mailing Address 31 Lakeshore Dr

City State Zip Code
Rockaway NJ 07866

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-1933-20-38

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

C. Thomas Garvey

Mailing Address 31 Lakeshore Dr

City State Zip Code
Rockaway NJ 07866

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-1924-20-38

Amount of Each Receipt this Period

19.25

SUBTOTAL of Receipts This Page (optional)..... ►

88.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas Garvey

Mailing Address 31 Lakeshore Dr

City State Zip Code
 Rockaway NJ 07866

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-1919-20-24

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

B. Willis H. Gee

Mailing Address 916 Ridge Road

City State Zip Code
 Hamden CT 06517

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Business Project Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-8852-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Willis H. Gee

Mailing Address 916 Ridge Road

City State Zip Code
 Hamden CT 06517

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Business Project Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-8827-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

219.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Willis H. Gee

Mailing Address 916 Ridge Road

City State Zip Code
Hamden CT 06517

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business Project Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-8804-20-24

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. David J. Giannoni

Mailing Address 2030 James Farm Rd

City State Zip Code
Stratford CT 06614

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-3772-20-38

Amount of Each Receipt this Period

6.48

Full Name (Last, First, Middle Initial)

C. David J. Giannoni

Mailing Address 2030 James Farm Rd

City State Zip Code
Stratford CT 06614

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-3759-20-38

Amount of Each Receipt this Period

6.48

SUBTOTAL of Receipts This Page (optional)..... ►

112.96

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David J. Giannoni

Mailing Address 2030 James Farm Rd

City State Zip Code
 Stratford CT 06614

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.69

Date of Receipt

MM / DD / YYYY
 07 / 31 / 2014

Transaction ID : 20140728-3754-20-24

Amount of Each Receipt this Period

13.84

Full Name (Last, First, Middle Initial)

B. Jennifer R. Gilbert

Mailing Address 61 S. Mendenhall

City State Zip Code
 Memphis TN 38117

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 HS Network Opns Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : 20140630-32009-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Jennifer R. Gilbert

Mailing Address 100 Logan Loop

City State Zip Code
 Collierville TN 38017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
 HS Network Opns Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
 07 / 17 / 2014

Transaction ID : 20140714-32095-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

113.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jennifer R. Gilbert

Mailing Address 100 Logan Loop

City State Zip Code
 Collierville TN 38017

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

HS Network Opns Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-32098-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Debra L. Glover

Mailing Address 1207 Eliot Rd

City State Zip Code
 Franklin TN 37064

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-30211-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. Debra L. Glover

Mailing Address 1207 Eliot Rd

City State Zip Code
 Franklin TN 37064

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-30309-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Debra L. Glover

Mailing Address 1207 Eliot Rd

City State Zip Code
Franklin TN 37064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-30325-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. John P. Godsill

Mailing Address 6 Collins View Road

City State Zip Code
Canton CT 06019

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

SVP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2560.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-8879-20-38

Amount of Each Receipt this Period

160.00

Full Name (Last, First, Middle Initial)

C. John P. Godsill

Mailing Address 6 Collins View Road

City State Zip Code
Canton CT 06019

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

SVP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2560.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-8854-20-38

Amount of Each Receipt this Period

160.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

370.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John P. Godsill

Mailing Address 6 Collins View Road

City State Zip Code
 Canton CT 06019

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

SVP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2560.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-8831-20-24

Amount of Each Receipt this Period

160.00

Full Name (Last, First, Middle Initial)

B. Ronald J. Goglia

Mailing Address 2063 Sherbrooke Dr

City State Zip Code
 Bethlehem PA 18015

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-2124-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

c. Ronald J. Goglia

Mailing Address 2063 Sherbrooke Dr

City State Zip Code
 Bethlehem PA 18015

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-2114-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ronald J. Goglia

Mailing Address 2063 Sherbrooke Dr

City State Zip Code
 Bethlehem PA 18015

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-2109-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Richard Gray

Mailing Address 138 Ballard Dr

City State Zip Code
 West Hartford CT 06119

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Strat And Bus Develop Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-1864-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Richard Gray

Mailing Address 138 Ballard Dr

City State Zip Code
 West Hartford CT 06119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
 Strat And Bus Develop Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-1855-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

70.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard Gray

Mailing Address 138 Ballard Dr

City State Zip Code
West Hartford CT 06119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Strat And Bus Develop Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : 20140728-1850-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Bruce M. Grimm

Mailing Address 47 Lake Ridge Drive

City State Zip Code
Marlborough CT 06447

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : 20140630-6682-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Bruce M. Grimm

Mailing Address 47 Lake Ridge Drive

City State Zip Code
Marlborough CT 06447

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : 20140714-6658-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bruce M. Grimm

Mailing Address 47 Lake Ridge Drive

City State Zip Code
 Marlborough CT 06447

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-6641-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Jeffrey C. Gross

Mailing Address 127 Lorraine Drive

City State Zip Code
 Storrs CT 06268

FEC ID number of contributing federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Information Protection Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-16772-20-38

Amount of Each Receipt this Period

24.00

Full Name (Last, First, Middle Initial)

c. Jeffrey C. Gross

Mailing Address 127 Lorraine Drive

City State Zip Code
 Storrs CT 06268

FEC ID number of contributing federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Information Protection Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-16721-20-38

Amount of Each Receipt this Period

24.00

SUBTOTAL of Receipts This Page (optional)..... ►

63.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeffrey C. Gross

Mailing Address 127 Lorraine Drive

City State Zip Code
 Storrs CT 06268

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Information Protection Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-16670-20-24

Amount of Each Receipt this Period

24.00

Full Name (Last, First, Middle Initial)

B. David D. Guilmette

Mailing Address 11 Green Hill Rd

City State Zip Code
 Chester NJ 07930

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-17754-20-38

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

C. David D. Guilmette

Mailing Address 11 Green Hill Rd

City State Zip Code
 Chester NJ 07930

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-17694-20-38

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)..... ►

408.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David D. Guilmette

Mailing Address 11 Green Hill Rd

City State Zip Code
 Chester NJ 07930

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

MM / DD / YYYY
 07 / 31 / 2014

Transaction ID : 20140728-17635-20-24

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. James E. Gulley

Mailing Address 720 Black Horse Parkway

City State Zip Code
 Franklin TN 37069

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : 20140630-30892-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

c. James E. Gulley

Mailing Address 720 Black Horse Parkway

City State Zip Code
 Franklin TN 37069

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
 07 / 17 / 2014

Transaction ID : 20140714-30985-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

242.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. James E. Gulley

Mailing Address 720 Black Horse Parkway

City State Zip Code
Franklin TN 37069

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : 20140728-30996-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Theresa A. Hall

Mailing Address 11537 Canterbury Lane

City State Zip Code
Parker CO 80138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : 20140630-14653-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Theresa A. Hall

Mailing Address 11537 Canterbury Lane

City State Zip Code
Parker CO 80138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : 20140714-14607-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Theresa A. Hall

Mailing Address 11537 Canterbury Lane

City State Zip Code
Parker CO 80138

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-14561-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Joseph L. Hannah

Mailing Address 9414 Indianfield DV

City State Zip Code
Mechanicsville VA 23116

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-4887-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

c. Joseph L. Hannah

Mailing Address 9414 Indianfield DV

City State Zip Code
Mechanicsville VA 23116

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-4868-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joseph L. Hannah

Mailing Address 9414 Indianfield DV

City State Zip Code
 Mechanicsville VA 23116

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-4859-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tobin B. Hawkins

Mailing Address 7218 Holder Forest Cir

City State Zip Code
 Houston TX 77088

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-5080-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Tobin B. Hawkins

Mailing Address 7218 Holder Forest Cir

City State Zip Code
 Houston TX 77088

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-5061-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

70.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tobin B. Hawkins

Mailing Address 7218 Holder Forest Cir

City State Zip Code
Houston TX 77088

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 31 2014

Transaction ID : 20140728-5052-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Ben K. Haynes

Mailing Address 2 Collins View Road

City State Zip Code
Canton CT 06019

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 03 2014

Transaction ID : 20140630-3501-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

c. Ben K. Haynes

Mailing Address 2 Collins View Road

City State Zip Code
Canton CT 06019

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 17 2014

Transaction ID : 20140714-3489-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ben K. Haynes

Mailing Address 2 Collins View Road

City State Zip Code
Canton CT 06019

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-3485-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Gregory T. Hicks

Mailing Address 5 Far Hills Dr.

City State Zip Code
Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
VP Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-10818-20-38

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Gregory T. Hicks

Mailing Address 5 Far Hills Dr.

City State Zip Code
Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
VP Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-10787-20-38

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gregory T. Hicks

Mailing Address 5 Far Hills Dr.

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-10764-20-24

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Anthony Hipp

Mailing Address 11459 Coach Dr

City

Mokena

State

IL

Zip Code

60448

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-12064-20-38

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

C. Anthony Hipp

Mailing Address 11459 Coach Dr

City

Mokena

State

IL

Zip Code

60448

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-12029-20-38

Amount of Each Receipt this Period

19.25

SUBTOTAL of Receipts This Page (optional)..... ►

78.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Anthony Hipp

Mailing Address 11459 Coach Dr

City State Zip Code
Mokena IL 60448

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-12003-20-24

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

B. Christopher J. Hocevar

Mailing Address 88 E Mountain Rd

City State Zip Code
Canton CT 06019

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1840.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-8834-20-38

Amount of Each Receipt this Period

115.00

Full Name (Last, First, Middle Initial)

c. Christopher J. Hocevar

Mailing Address 88 E Mountain Rd

City State Zip Code
Canton CT 06019

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1840.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-8809-20-38

Amount of Each Receipt this Period

115.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

249.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Christopher J. Hocevar

Mailing Address 88 E Mountain Rd

City

State

Zip Code

Canton

CT

06019

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1840.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-8786-20-24

Amount of Each Receipt this Period

115.00

Full Name (Last, First, Middle Initial)

B. Robert P. Hockmuth

Mailing Address 143 Mill Rd

City

State

Zip Code

North Hampton

NH

03862

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Senior Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

307.84

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-751-20-38

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

C. Robert P. Hockmuth

Mailing Address 143 Mill Rd

City

State

Zip Code

North Hampton

NH

03862

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Senior Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

307.84

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-746-20-38

Amount of Each Receipt this Period

19.24

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

153.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert P. Hockmuth

Mailing Address 143 Mill Rd

City State Zip Code
 North Hampton NH 03862

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Medical Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-745-20-24

Amount of Each Receipt this Period

99.24

Full Name (Last, First, Middle Initial)

B. Michael Horlacher

Mailing Address 16 McIntosh Rd

City State Zip Code
 Sewell NJ 08080

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-2833-20-38

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Michael Horlacher

Mailing Address 16 McIntosh Rd

City State Zip Code
 Sewell NJ 08080

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-2822-20-38

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

99.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael Horlacher

Mailing Address 16 McIntosh Rd

City State Zip Code
 Sewell NJ 08080

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-2817-20-24

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Tamara Horwitz

Mailing Address 3430 List Place

City State Zip Code
 Minneapolis MN 55416

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Marketing Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-15795-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Tamara Horwitz

Mailing Address 3430 List Place

City State Zip Code
 Minneapolis MN 55416

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Marketing Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-15745-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tamara Horwitz

Mailing Address 3430 List Place

City

Minneapolis

State

MN

Zip Code

55416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-15698-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Julia M. Huggins

Mailing Address 1900 Killarny Dr

City

Westminster

State

MD

Zip Code

21157

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-486-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Julia M. Huggins

Mailing Address 1900 Killarny Dr

City

Westminster

State

MD

Zip Code

21157

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-482-20-38

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

175.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Julia M. Huggins

Mailing Address 1900 Killarny Dr

City

Westminster

State

MD

Zip Code

21157

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-481-20-24

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Jay L. Hurt

Mailing Address 5822 Mountain View Drive

City

Kingwood

State

TX

Zip Code

77345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-31615-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Jay L. Hurt

Mailing Address 5822 Mountain View Drive

City

Kingwood

State

TX

Zip Code

77345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-31705-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

275.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay L. Hurt

Mailing Address 5822 Mountain View Drive

City
KingwoodState
TXZip Code
77345FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-31711-20-24

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Moin M. Iftekhar

Mailing Address 210 Cabot Court

City
DeptfordState
NJZip Code
08096FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

IT Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-1954-20-24

Amount of Each Receipt this Period

12.96

Full Name (Last, First, Middle Initial)

C. Alan Innes

Mailing Address 19 Harvest Hill Rd

City
West SimsburyState
CTZip Code
06092FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-1683-20-38

Amount of Each Receipt this Period

19.25

SUBTOTAL of Receipts This Page (optional)..... ►

132.21

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alan Innes

Mailing Address 19 Harvest Hill Rd

City State Zip Code
 West Simsbury CT 06092

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-1676-20-38

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

B. Alan Innes

Mailing Address 19 Harvest Hill Rd

City State Zip Code
 West Simsbury CT 06092

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-1672-20-24

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

C. John M. Jacobs

Mailing Address 406 Beaumont Circle

City State Zip Code
 West Chester PA 19380

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-2693-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

63.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John M. Jacobs

Mailing Address 406 Beaumont Circle

City State Zip Code
West Chester PA 19380

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : 20140714-2683-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. John M. Jacobs

Mailing Address 406 Beaumont Circle

City State Zip Code
West Chester PA 19380

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : 20140728-2679-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Clifton S. Jacobson

Mailing Address 7034 Lakewood Blvd.

City State Zip Code
Dallas TX 75214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : 20140630-31546-20-38

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)..... ►

242.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Clifton S. Jacobson

Mailing Address 7034 Lakewood Blvd.

City State Zip Code
 Dallas TX 75214

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-31637-20-38

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

B. Clifton S. Jacobson

Mailing Address 7034 Lakewood Blvd.

City State Zip Code
 Dallas TX 75214

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-31643-20-24

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

C. William S. Jameson

Mailing Address 690 Bradford St

City State Zip Code
 Pasadena CA 91105

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-6067-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

409.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. William S. Jameson

Mailing Address 690 Bradford St

City State Zip Code
Pasadena CA 91105

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y
07 17 2014

Transaction ID : 20140714-6045-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. William S. Jameson

Mailing Address 690 Bradford St

City State Zip Code
Pasadena CA 91105

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y
07 31 2014

Transaction ID : 20140728-6029-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. James M. Jeffers

Mailing Address 50 Paley Farms Rd

City State Zip Code
Portland CT 06480

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y
07 03 2014

Transaction ID : 20140630-275-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. James M. Jeffers

Mailing Address 50 Paley Farms Rd

City State Zip Code
Portland CT 06480

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-273-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. James M. Jeffers

Mailing Address 50 Paley Farms Rd

City State Zip Code
Portland CT 06480

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-273-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Nicole S. Jones

Mailing Address 51 Old Stone Crossing

City State Zip Code
West Hartford CT 06117

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
EVP Genl Counsel & Pub Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-12430-20-38

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)..... ►

292.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Nicole S. Jones

Mailing Address 51 Old Stone Crossing

City State Zip Code
West Hartford CT 06117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Genl Counsel & Pub Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-12394-20-38

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. Nicole S. Jones

Mailing Address 51 Old Stone Crossing

City State Zip Code
West Hartford CT 06117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Genl Counsel & Pub Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-12366-20-24

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

C. Teresa R. Jordan

Mailing Address 5425 Newcastle St

City State Zip Code
Bellaire TX 77401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-30187-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

434.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Teresa R. Jordan

Mailing Address 5425 Newcastle St

City State Zip Code
 Bellaire TX 77401

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-30285-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Teresa R. Jordan

Mailing Address 5425 Newcastle St

City State Zip Code
 Bellaire TX 77401

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-30301-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Scott Josephs

Mailing Address 403 Tramore Dr

City State Zip Code
 Chapel Hill NC 27516

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-6594-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Scott Josephs

Mailing Address 403 Tramore Dr

City State Zip Code
 Chapel Hill NC 27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-6571-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Scott Josephs

Mailing Address 403 Tramore Dr

City State Zip Code
 Chapel Hill NC 27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-6554-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Shankar Kalyanasundaram

Mailing Address 4 Rockwell Ct

City State Zip Code
 South Windsor CT 06074

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-9571-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Shankar Kalyanasundaram

Mailing Address 4 Rockwell Ct

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-9544-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Shankar Kalyanasundaram

Mailing Address 4 Rockwell Ct

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-9522-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Benjamin W. Katz

Mailing Address 3246 Marlene Drive

City

Lafayette

State

CA

Zip Code

94549

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna HEALTHCARE OF CA, INC.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-6210-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 118 OF 241

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Benjamin W. Katz

Mailing Address 3246 Marlene Drive

City State Zip Code
 Lafayette CA 94549

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna HEALTHCARE OF CA, INC.

Occupation
 Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-6188-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Benjamin W. Katz

Mailing Address 3246 Marlene Drive

City State Zip Code
 Lafayette CA 94549

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna HEALTHCARE OF CA, INC.

Occupation
 Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-6171-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Joan Kennedy

Mailing Address 9 NE Lofting Way

City State Zip Code
 Stuart FL 34996

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
 VP Consumer Health Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2560.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-22678-20-38

Amount of Each Receipt this Period

160.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

260.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joan Kennedy

Mailing Address 9 NE Lofting Way

City State Zip Code
 Stuart FL 34996

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Consumer Health Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2560.00

Date of Receipt

MM / DD / YYYY
 07 / 17 / 2014

Transaction ID : 20140714-22599-20-38

Amount of Each Receipt this Period

160.00

Full Name (Last, First, Middle Initial)

B. Joan Kennedy

Mailing Address 9 NE Lofting Way

City State Zip Code
 Stuart FL 34996

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Consumer Health Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2560.00

Date of Receipt

MM / DD / YYYY
 07 / 31 / 2014

Transaction ID : 20140728-22498-20-24

Amount of Each Receipt this Period

160.00

Full Name (Last, First, Middle Initial)

C. Edward S. Kim

Mailing Address 28515 N. North Valley Parkway

City State Zip Code
 Phoenix AZ 85085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : 20140630-20150-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

370.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Edward S. Kim

Mailing Address 28515 N. North Valley Parkway

City State Zip Code
 Phoenix AZ 85085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
 07 / 17 / 2014

Transaction ID : 20140714-20077-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Edward S. Kim

Mailing Address 28515 N. North Valley Parkway

City State Zip Code
 Phoenix AZ 85085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
 07 / 31 / 2014

Transaction ID : 20140728-20006-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Kristinn K. Klunkert

Mailing Address 21302 Shawnee Park Dr.

City State Zip Code
 Richmond TX 77406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : 20140630-31632-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kristinn K. Klunkert

Mailing Address 21302 Shawnee Park Dr.

City State Zip Code
 Richmond TX 77406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-31722-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Kristinn K. Klunkert

Mailing Address 21302 Shawnee Park Dr.

City State Zip Code
 Richmond TX 77406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-31728-20-34

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. James Kucharczyk

Mailing Address 35 Maple Street

City State Zip Code
 New Canaan CT 06840

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Strategic Sourcing Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-19975-20-38

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. James Kucharczyk

Mailing Address 35 Maple Street

City State Zip Code
 New Canaan CT 06840

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Strategic Sourcing Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-19905-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. James Kucharczyk

Mailing Address 35 Maple Street

City State Zip Code
 New Canaan CT 06840

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Strategic Sourcing Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-19834-20-24

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Diana L. Kycia

Mailing Address 98 Garfield Rd

City State Zip Code
 West Hartford CT 06107

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.42

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-884-20-38

Amount of Each Receipt this Period

15.29

SUBTOTAL of Receipts This Page (optional)..... ►

165.29

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Diana L. Kycia

Mailing Address 98 Garfield Rd

City State Zip Code
 West Hartford CT 06107

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.42

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-879-20-38

Amount of Each Receipt this Period

15.36

Full Name (Last, First, Middle Initial)

B. Diana L. Kycia

Mailing Address 98 Garfield Rd

City State Zip Code
 West Hartford CT 06107

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.42

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-878-20-24

Amount of Each Receipt this Period

15.29

Full Name (Last, First, Middle Initial)

C. Edward F. LaClair

Mailing Address 613 Dunn Ave

City State Zip Code
 Old Forge PA 18518

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-1829-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

50.65

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Edward F. LaClair

Mailing Address 613 Dunn Ave

City State Zip Code
 Old Forge PA 18518

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-1820-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Edward F. LaClair

Mailing Address 613 Dunn Ave

City State Zip Code
 Old Forge PA 18518

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-1815-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Kenneth P. Langevin

Mailing Address 32 Castlewood Rd

City State Zip Code
 West Hartford CT 06107

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-1298-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kenneth P. Langevin

Mailing Address 32 Castlewood Rd

City State Zip Code
West Hartford CT 06107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-1293-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Kenneth P. Langevin

Mailing Address 32 Castlewood Rd

City State Zip Code
West Hartford CT 06107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-1291-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Amy C. Lazzaro

Mailing Address 168 Old Farms Road

City State Zip Code
South Glastonbury CT 06073

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-22433-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Amy C. Lazzaro

Mailing Address 168 Old Farms Road

City State Zip Code
 South Glastonbury CT 06073

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-22355-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Amy C. Lazzaro

Mailing Address 168 Old Farms Road

City State Zip Code
 South Glastonbury CT 06073

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-22256-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. James Lemieux

Mailing Address 41 Lakeshore Dr

City State Zip Code
 New Hartford CT 06057

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-1032-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. James Lemieux

Mailing Address 41 Lakeshore Dr

City

New Hartford

State

CT

Zip Code

06057

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-1027-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. James Lemieux

Mailing Address 41 Lakeshore Dr

City

New Hartford

State

CT

Zip Code

06057

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-1025-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Arthur W. Licon

Mailing Address 3029 River Road

City

Kankakee

State

IL

Zip Code

60901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-30298-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Arthur W. Licon

Mailing Address 3029 River Road

City

Kankakee

State

IL

Zip Code

60901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Account Director

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-30396-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Arthur W. Licon

Mailing Address 3029 River Road

City

Kankakee

State

IL

Zip Code

60901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Account Director

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-30410-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. Christopher J. Lockery

Mailing Address 760 Ives Row

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Dir

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-9878-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Christopher J. Lockery

Mailing Address 760 Ives Row

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-9850-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Christopher J. Lockery

Mailing Address 760 Ives Row

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-9828-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. William M. Lopez

Mailing Address 1006 Columbine Road

City

Asheville

State

NC

Zip Code

28803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-12099-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. William M. Lopez

Mailing Address 1006 Columbine Road

City

Asheville

State

NC

Zip Code

28803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-12064-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. William M. Lopez

Mailing Address 1006 Columbine Road

City

Asheville

State

NC

Zip Code

28803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-12038-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Scott A. Macchi

Mailing Address 28 Aspen Hill Drive

City

Falls Village

State

CT

Zip Code

06031

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-792-20-38

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Scott A. Macchi

Mailing Address 28 Aspen Hill Drive

City State Zip Code
 Falls Village CT 06031

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-787-20-38

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Scott A. Macchi

Mailing Address 28 Aspen Hill Drive

City State Zip Code
 Falls Village CT 06031

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-786-20-24

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Jon E. Maesner

Mailing Address 22 Crosswood Rd

City State Zip Code
 Farmington CT 06032

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Clinical Program Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-5940-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jon E. Maesner

Mailing Address 22 Crosswood Rd

City State Zip Code
 Farmington CT 06032

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Clinical Program Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-5918-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Jon E. Maesner

Mailing Address 22 Crosswood Rd

City State Zip Code
 Farmington CT 06032

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Clinical Program Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-5902-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Matthew G. Manders

Mailing Address 2 Remington Ln

City State Zip Code
 Malvern PA 19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Pres US Mkts & Global HC Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-1995-20-38

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)..... ►

222.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Matthew G. Manders

Mailing Address 2 Remington Ln

City State Zip Code
Malvern PA 19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Pres US Mkts & Global HC Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-1986-20-38

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. Matthew G. Manders

Mailing Address 2 Remington Ln

City State Zip Code
Malvern PA 19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Pres US Mkts & Global HC Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-1981-20-24

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

c. Carla C. Mangiafico

Mailing Address 47 Kelsey Ln

City State Zip Code
Glastonbury CT 06033

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-256-20-38

Amount of Each Receipt this Period

19.00

SUBTOTAL of Receipts This Page (optional)..... ►

403.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Carla C. Mangiafico

Mailing Address 47 Kelsey Ln

City State Zip Code
 Glastonbury CT 06033

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-254-20-38

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

B. Carla C. Mangiafico

Mailing Address 47 Kelsey Ln

City State Zip Code
 Glastonbury CT 06033

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-254-20-24

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

C. Mark P. Marsters

Mailing Address 13 Devonshire Ln

City State Zip Code
 Malvern PA 19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AMERICA

Occupation
 VP Service Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-9707-20-38

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

113.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark P. Marsters

Mailing Address 13 Devonshire Ln

City State Zip Code
 Malvern PA 19355

FEC ID number of contributing federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AMERICA

Occupation
 VP Service Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-9679-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Mark P. Marsters

Mailing Address 13 Devonshire Ln

City State Zip Code
 Malvern PA 19355

FEC ID number of contributing federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AMERICA

Occupation
 VP Service Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-9658-20-24

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Thomas J. Martel

Mailing Address 5 Melville Walk

City State Zip Code
 Hingham MA 02043

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-9414-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas J. Martel

Mailing Address 5 Melville Walk

City

Hingham

State

MA

Zip Code

02043

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-9390-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Thomas J. Martel

Mailing Address 5 Melville Walk

City

Hingham

State

MA

Zip Code

02043

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-9369-20-24

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Louise M. McCagg

Mailing Address 9920 Springfield Drive

City

Ellicott City

State

MD

Zip Code

21042

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-30109-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Louise M. McCagg

Mailing Address 9920 Springfield Drive

City State Zip Code
 Ellicott City MD 21042

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
 07 / 17 / 2014

Transaction ID : 20140714-30207-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Louise M. McCagg

Mailing Address 9920 Springfield Drive

City State Zip Code
 Ellicott City MD 21042

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
 07 / 31 / 2014

Transaction ID : 20140728-30223-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Elaine McCarthy

Mailing Address 1209 Lindale Ave

City State Zip Code
 Drexel Hill PA 19026

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Segment Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : 20140630-2352-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Elaine McCarthy

Mailing Address 1209 Lindale Ave

City

Drexel Hill

State

PA

Zip Code

19026

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Segment Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-2342-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Elaine McCarthy

Mailing Address 1209 Lindale Ave

City

Drexel Hill

State

PA

Zip Code

19026

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Segment Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-2337-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Thomas A. McCarthy

Mailing Address 318 Chester Rd

City

Devon

State

PA

Zip Code

19333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-8980-20-38

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas A. McCarthy

Mailing Address 318 Chester Rd

City

Devon

State

PA

Zip Code

19333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-8954-20-38

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Thomas A. McCarthy

Mailing Address 318 Chester Rd

City

Devon

State

PA

Zip Code

19333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-8931-20-24

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Peter W. McCauley

Mailing Address 3140 S. Prairie Ave

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-18085-20-38

Amount of Each Receipt this Period

22.00

SUBTOTAL of Receipts This Page (optional)..... ►

272.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Peter W. McCauley

Mailing Address 3140 S. Prairie Ave

City State Zip Code
Chicago IL 60616

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-18022-20-38

Amount of Each Receipt this Period

22.00

Full Name (Last, First, Middle Initial)

B. Peter W. McCauley

Mailing Address 3140 S. Prairie Ave

City State Zip Code
Chicago IL 60616

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-17963-20-24

Amount of Each Receipt this Period

22.00

Full Name (Last, First, Middle Initial)

C. David J. McDonald

Mailing Address 1 Cardinal Drive

City State Zip Code
Bow NH 03304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-21408-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

64.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David J. McDonald

Mailing Address 1 Cardinal Drive

City State Zip Code
Bow NH 03304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-21329-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. David J. McDonald

Mailing Address 1 Cardinal Drive

City State Zip Code
Bow NH 03304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-21236-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

c. Sheila McGinley-Graziosi

Mailing Address 32 Starview Dr

City State Zip Code
Glastonbury CT 06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-1358-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sheila McGinley-Graziosi

Mailing Address 32 Starview Dr

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-1353-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Sheila McGinley-Graziosi

Mailing Address 32 Starview Dr

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-1351-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Susan E. McMurray

Mailing Address 32 Bass Dr

City

Enfield

State

CT

Zip Code

06082

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Accounting Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-455-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Susan E. McMurray

Mailing Address 32 Bass Dr

City State Zip Code
 Enfield CT 06082

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Accounting Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-451-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Susan E. McMurray

Mailing Address 32 Bass Dr

City State Zip Code
 Enfield CT 06082

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Accounting Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-450-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Marta Meester

Mailing Address 10550 Viacha Dr

City State Zip Code
 San Diego CA 92124

FEC ID number of contributing federal political committee.

C

Name of Employer
 Cigna HEALTHCARE OF CA, INC.

Occupation
 Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-6032-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

70.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Marta Meester

Mailing Address 10550 Viacha Dr

City

San Diego

State

CA

Zip Code

92124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna HEALTHCARE OF CA, INC.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-6010-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Marta Meester

Mailing Address 10550 Viacha Dr

City

San Diego

State

CA

Zip Code

92124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna HEALTHCARE OF CA, INC.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-5994-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Gregory J. Miller

Mailing Address 9450 Norwood Dr

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-30149-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

65.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gregory J. Miller

Mailing Address 9450 Norwood Dr

City State Zip Code
 Brentwood TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-30247-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Gregory J. Miller

Mailing Address 9450 Norwood Dr

City State Zip Code
 Brentwood TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-30263-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. David E. Mino

Mailing Address 103 Lafayette Dr

City State Zip Code
 Washington Crossin PA 18977

FEC ID number of contributing
federal political committee.

C

Name of Employer

INT'L REHAB. ASSOCIATES, INC.

Occupation

Medical Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-9755-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

65.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David E. Mino

Mailing Address 103 Lafayette Dr

City State Zip Code
Washington Crossin PA 18977

FEC ID number of contributing
federal political committee.

C

Name of Employer
INT'L REHAB. ASSOCIATES, INC.

Occupation
Medical Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-9727-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. David E. Mino

Mailing Address 103 Lafayette Dr

City State Zip Code
Washington Crossin PA 18977

FEC ID number of contributing
federal political committee.

C

Name of Employer
INT'L REHAB. ASSOCIATES, INC.

Occupation
Medical Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-9706-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

c. Morris D. Mirabella

Mailing Address 5820 Aventura Ct

City State Zip Code
Tampa FL 33625

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-6362-20-38

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Morris D. Mirabella

Mailing Address 5820 Aventura Ct

City

Tampa

State

FL

Zip Code

33625

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-6339-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Morris D. Mirabella

Mailing Address 5820 Aventura Ct

City

Tampa

State

FL

Zip Code

33625

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-6322-20-24

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Kymberly P. Miranda

Mailing Address 520 SE 5th Avenue

City

Fort Lauderdale

State

FL

Zip Code

33301

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Account Manager-National Accts

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-4337-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kymberly P. Miranda

Mailing Address 520 SE 5th Avenue

City

Fort Lauderdale

State

FL

Zip Code

33301

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Account Manager-National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-4319-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Kymberly P. Miranda

Mailing Address 520 SE 5th Avenue

City

Fort Lauderdale

State

FL

Zip Code

33301

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Account Manager-National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-4311-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Frank A. Monahan

Mailing Address 14705 Carter Rd

City

Overland Park

State

KS

Zip Code

66221

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-10697-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Frank A. Monahan

Mailing Address 14705 Carter Rd

City State Zip Code
 Overland Park KS 66221

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-10667-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Frank A. Monahan

Mailing Address 14705 Carter Rd

City State Zip Code
 Overland Park KS 66221

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-10644-20-24

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Alan M. Muney

Mailing Address 70 Leeuwarden Rd

City State Zip Code
 Darien CT 06820

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Total Med/Chief Med Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-17827-20-38

Amount of Each Receipt this Period

175.00

SUBTOTAL of Receipts This Page (optional)..... ►

375.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alan M. Muney

Mailing Address 70 Leeuwarden Rd

City State Zip Code
 Darien CT 06820

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Total Med/Chief Med Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-17766-20-38

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

B. Alan M. Muney

Mailing Address 70 Leeuwarden Rd

City State Zip Code
 Darien CT 06820

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Total Med/Chief Med Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-17707-20-24

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

C. John M. Murabito

Mailing Address 105 Mill View Ln

City State Zip Code
 Newtown Square PA 19073

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Human Resources & Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-9984-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

450.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John M. Murabito

Mailing Address 105 Mill View Ln

City

Newtown Square

State

PA

Zip Code

19073

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Human Resources & Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-9956-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. John M. Murabito

Mailing Address 105 Mill View Ln

City

Newtown Square

State

PA

Zip Code

19073

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Human Resources & Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-9934-20-24

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Paula Murphy

Mailing Address 11 Dally Farms Rd

City

Windsor

State

CT

Zip Code

06095

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-4308-20-38

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Paula Murphy

Mailing Address 11 Dally Farms Rd

City Windsor State CT Zip Code 06095

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-4291-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Paula Murphy

Mailing Address 11 Dally Farms Rd

City Windsor State CT Zip Code 06095

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-4283-20-24

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Noreen Nageotte

Mailing Address 28205 W Oviatt Rd

City Bay Village State OH Zip Code 44140

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-6815-20-38

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Noreen Nageotte

Mailing Address 28205 W Oviatt Rd

City State Zip Code
 Bay Village OH 44140

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-6790-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Noreen Nageotte

Mailing Address 28205 W Oviatt Rd

City State Zip Code
 Bay Village OH 44140

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-6774-20-24

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Laurinda M. Newell

Mailing Address 3409 E Rockwood Dr

City State Zip Code
 Phoenix AZ 85050

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-9803-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Laurinda M. Newell

Mailing Address 3409 E Rockwood Dr

City

Phoenix

State

AZ

Zip Code

85050

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-9775-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Laurinda M. Newell

Mailing Address 3409 E Rockwood Dr

City

Phoenix

State

AZ

Zip Code

85050

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-9754-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Daniel Nicoll

Mailing Address 4 Bayview Dr

City

Plainview

State

NY

Zip Code

11803

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Senior Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

430.88

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-1899-20-38

Amount of Each Receipt this Period

26.93

SUBTOTAL of Receipts This Page (optional)..... ►

126.93

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 155 OF 241
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Daniel Nicoll

Mailing Address 4 Bayview Dr

City State Zip Code
Plainview NY 11803

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Medical Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-1890-20-38

Amount of Each Receipt this Period

26.93

Full Name (Last, First, Middle Initial)

B. Daniel Nicoll

Mailing Address 4 Bayview Dr

City State Zip Code
Plainview NY 11803

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Medical Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-1885-20-24

Amount of Each Receipt this Period

26.93

Full Name (Last, First, Middle Initial)

C. Michael T. Nole

Mailing Address 4822 South Classical Blvd

City State Zip Code
Delray Beach FL 33445

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
Sales Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-16817-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael T. Nole

Mailing Address 4822 South Classical Blvd

City State Zip Code
 Delray Beach FL 33445

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-16766-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Michael T. Nole

Mailing Address 4822 South Classical Blvd

City State Zip Code
 Delray Beach FL 33445

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-16715-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Richard S. Novack

Mailing Address 440 Bircham Way

City State Zip Code
 Roswell GA 30075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-16651-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard S. Novack

Mailing Address 440 Bircham Way

City Roswell State GA Zip Code 30075

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-16600-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Richard S. Novack

Mailing Address 440 Bircham Way

City Roswell State GA Zip Code 30075

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-16550-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Eliana M. Nunez

Mailing Address 120 Ridge Crest Cir

City Wethersfield State CT Zip Code 06109

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operating Effectiveness Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-1154-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eliana M. Nunez

Mailing Address 120 Ridge Crest Cir

City

Wethersfield

State

CT

Zip Code

06109

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operating Effectiveness Sr Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-1149-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Eliana M. Nunez

Mailing Address 120 Ridge Crest Cir

City

Wethersfield

State

CT

Zip Code

06109

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operating Effectiveness Sr Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-1147-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. William J. O'Donnell

Mailing Address 18 Crescent Drive

City

Thiells

State

NY

Zip Code

10984

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-15110-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. William J. O'Donnell

Mailing Address 18 Crescent Drive

City State Zip Code
 Thiells NY 10984

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-15063-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. William J. O'Donnell

Mailing Address 18 Crescent Drive

City State Zip Code
 Thiells NY 10984

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-15017-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. John Oates

Mailing Address 1701 Patterson Road

City State Zip Code
 Austin TX 78733

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-12361-20-38

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)..... ►

232.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John Oates

Mailing Address 1701 Patterson Road

City State Zip Code
 Austin TX 78733

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

M M / D D / Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-12325-20-38

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

B. John Oates

Mailing Address 1701 Patterson Road

City State Zip Code
 Austin TX 78733

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

M M / D D / Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-12297-20-24

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

C. Eric P. Palmer

Mailing Address 42 Ridgeview Drive

City State Zip Code
 Ellington CT 06029

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-5539-20-38

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)..... ►

576.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eric P. Palmer

Mailing Address 42 Ridgeview Drive

City State Zip Code
 Ellington CT 06029

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-5519-20-38

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. Eric P. Palmer

Mailing Address 42 Ridgeview Drive

City State Zip Code
 Ellington CT 06029

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-5508-20-24

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

c. Jeffery P. Panter

Mailing Address 1947 Turnberry Cir

City State Zip Code
 Hixson TN 37343

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-4579-20-38

Amount of Each Receipt this Period

19.25

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

403.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeffery P. Panter

Mailing Address 1947 Turnberry Cir

City State Zip Code
Hixson TN 37343

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-4561-20-38

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

B. Jeffery P. Panter

Mailing Address 1947 Turnberry Cir

City State Zip Code
Hixson TN 37343

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-4553-20-24

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

C. Mark A. Parsons

Mailing Address 4 Thistle Hollow

City State Zip Code
Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
SVP Reinsurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-432-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

88.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark A. Parsons

Mailing Address 4 Thistle Hollow

City State Zip Code
Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
SVP Reinsurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-428-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mark A. Parsons

Mailing Address 4 Thistle Hollow

City State Zip Code
Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
SVP Reinsurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-427-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Allen C. Perez

Mailing Address 27622 Robillard Springs Lane

City State Zip Code
Katy TX 77494

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-31609-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Allen C. Perez

Mailing Address 27622 Robillard Springs Lane

City State Zip Code
 Katy TX 77494

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-31699-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Allen C. Perez

Mailing Address 27622 Robillard Springs Lane

City State Zip Code
 Katy TX 77494

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-31705-20-24

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Heather R. Peterson

Mailing Address 134 Delta Blvd

City State Zip Code
 Franklin TN 37067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-30288-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Heather R. Peterson

Mailing Address 134 Delta Blvd

City State Zip Code
 Franklin TN 37067

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-30386-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Heather R. Peterson

Mailing Address 134 Delta Blvd

City State Zip Code
 Franklin TN 37067

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-30400-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Danthu T. Phan

Mailing Address 819 N. 4th Street

City State Zip Code
 Philadelphia PA 19123

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-10787-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Danthu T. Phan

Mailing Address 819 N. 4th Street

City

Philadelphia

State

PA

Zip Code

19123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-10757-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Danthu T. Phan

Mailing Address 819 N. 4th Street

City

Philadelphia

State

PA

Zip Code

19123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-10734-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Robert D. Picinich

Mailing Address 1096 Maple Hill Ln

City

Malvern

State

PA

Zip Code

19355

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-1989-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert D. Picinich

Mailing Address 1096 Maple Hill Ln

City State Zip Code
 Malvern PA 19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-1980-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Robert D. Picinich

Mailing Address 1096 Maple Hill Ln

City State Zip Code
 Malvern PA 19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-1975-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Jeremiah Pierson

Mailing Address 317 Spyglass hill Rd

City State Zip Code
 Bath PA 18014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
 Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-23072-20-38

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeremiah Pierson

Mailing Address 317 Spyglass hill Rd

City State Zip Code
 Bath PA 18014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-22995-20-38

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Jeremiah Pierson

Mailing Address 317 Spyglass hill Rd

City State Zip Code
 Bath PA 18014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-22889-20-24

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Charles C. Pitts

Mailing Address 622 Museum Drive

City State Zip Code
 Charlotte NC 28207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-12557-20-38

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Charles C. Pitts

Mailing Address 622 Museum Drive

City State Zip Code
Charlotte NC 28207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-12521-20-38

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Charles C. Pitts

Mailing Address 622 Museum Drive

City State Zip Code
Charlotte NC 28207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-12493-20-24

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. David M. Porcello

Mailing Address 24 Magnolia Dr

City State Zip Code
Suffield CT 06078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-1245-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

130.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David M. Porcello

Mailing Address 24 Magnolia Dr

City
Suffield

State
CT

Zip Code
06078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-1240-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. David M. Porcello

Mailing Address 24 Magnolia Dr

City
Suffield

State
CT

Zip Code
06078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-1238-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Jonathan M. Prokup

Mailing Address 4633 Hazel Avenue

City
Philadelphia

State
PA

Zip Code
19143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-22300-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jonathan M. Prokup

Mailing Address 4633 Hazel Avenue

City State Zip Code
Philadelphia PA 19143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-22224-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Jonathan M. Prokup

Mailing Address 4633 Hazel Avenue

City State Zip Code
Philadelphia PA 19143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-22127-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Philip Rabinowitz

Mailing Address 306 Rustin Way

City State Zip Code
Wexford PA 15090

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-11570-20-38

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

140.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Philip Rabinowitz

Mailing Address 306 Rustin Way

City

Wexford

State

PA

Zip Code

15090

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

640.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-11534-20-38

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Philip Rabinowitz

Mailing Address 306 Rustin Way

City

Wexford

State

PA

Zip Code

15090

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

640.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-11510-20-24

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Edward J. Rado

Mailing Address 39 Split Rock Dr.

City

Wolcott

State

CT

Zip Code

06716

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-16345-20-38

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Edward J. Rado

Mailing Address 39 Split Rock Dr.

City State Zip Code
Wolcott CT 06716

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-16294-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Edward J. Rado

Mailing Address 39 Split Rock Dr.

City State Zip Code
Wolcott CT 06716

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-16244-20-24

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Eugene J. Rapisardi

Mailing Address 7360 Weatherly Place

City State Zip Code
Rancho Cucamonga CA 91730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-14103-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eugene J. Rapisardi

Mailing Address 7360 Weatherly Place

City State Zip Code
 Rancho Cucamonga CA 91730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-14060-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Eugene J. Rapisardi

Mailing Address 7360 Weatherly Place

City State Zip Code
 Rancho Cucamonga CA 91730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-14020-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. William J. Reedy

Mailing Address 1539 E Hackamore St

City State Zip Code
 Mesa AZ 85203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna HEALTHCARE OF AZ, INC

Occupation

Urgent Care Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-5479-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. William J. Reedy

Mailing Address 1539 E Hackamore St

City State Zip Code
Mesa AZ 85203

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna HEALTHCARE OF AZ, INC

Occupation

Urgent Care Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-5459-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. William J. Reedy

Mailing Address 1539 E Hackamore St

City State Zip Code
Mesa AZ 85203

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna HEALTHCARE OF AZ, INC

Occupation

Urgent Care Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-5449-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Brett A. Reinholz

Mailing Address 1936 North Hudson Avenue

City State Zip Code
Chicago IL 60614

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Administration Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-3867-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brett A. Reinholz

Mailing Address 1936 North Hudson Avenue

City State Zip Code
Chicago IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Sales Administration Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-3850-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Brett A. Reinholz

Mailing Address 1936 North Hudson Avenue

City State Zip Code
Chicago IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Sales Administration Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-3845-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Thomas B. Richards

Mailing Address 3 Scarborough Farms Rd

City State Zip Code
Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
VP Strategy and Bus Developmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-627-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas B. Richards

Mailing Address 3 Scarborough Farms Rd

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 VP Strategy and Bus Developmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-622-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Thomas B. Richards

Mailing Address 3 Scarborough Farms Rd

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 VP Strategy and Bus Developmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-620-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

c. Jeffrey T. Rigg

Mailing Address 7 Westmeadow Lane

City State Zip Code
 Newark DE 19711

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
 VP Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-19783-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeffrey T. Rigg

Mailing Address 7 Westmeadow Lane

City State Zip Code
 Newark DE 19711

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-19715-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Jeffrey T. Rigg

Mailing Address 7 Westmeadow Lane

City State Zip Code
 Newark DE 19711

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-19644-20-24

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Catherine M. Riley

Mailing Address 1 Sand Dollar Dr

City State Zip Code
 Isle Of Palms SC 29451

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-1963-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Catherine M. Riley

Mailing Address 1 Sand Dollar Dr

City State Zip Code
 Isle Of Palms SC 29451

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-1954-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Catherine M. Riley

Mailing Address 1 Sand Dollar Dr

City State Zip Code
 Isle Of Palms SC 29451

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-1949-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Cathryn Riley

Mailing Address 26724 N. 14th Lane

City State Zip Code
 Phoenix AZ 85085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
 Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-16694-20-38

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Cathryn Riley

Mailing Address 26724 N. 14th Lane

City
Phoenix

State
AZ

Zip Code
85085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-16643-20-38

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

B. Cathryn Riley

Mailing Address 26724 N. 14th Lane

City
Phoenix

State
AZ

Zip Code
85085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-16593-20-24

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. Kevin L. Ritchie

Mailing Address 15 William Street

City
New York

State
NY

Zip Code
10005

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-798-20-38

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kevin L. Ritchie

Mailing Address 15 William Street

City
New York

State
NY

Zip Code
10005

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-793-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Kevin L. Ritchie

Mailing Address 15 William Street

City
New York

State
NY

Zip Code
10005

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-792-20-24

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. John Rottkamp

Mailing Address 23 Livingston Road

City
Canton

State
CT

Zip Code
06019

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Enterprise Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-1788-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John Rottkamp

Mailing Address 23 Livingston Road

City State Zip Code
 Canton CT 06019

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Enterprise Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-1779-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. John Rottkamp

Mailing Address 23 Livingston Road

City State Zip Code
 Canton CT 06019

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Enterprise Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-1774-20-24

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Diane C. Russell

Mailing Address 495 Wesley Rd

City State Zip Code
 Springfield PA 19064

FEC ID number of contributing federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-2770-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

215.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Diane C. Russell

Mailing Address 495 Wesley Rd

City

Springfield

State

PA

Zip Code

19064

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-2759-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Diane C. Russell

Mailing Address 495 Wesley Rd

City

Springfield

State

PA

Zip Code

19064

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-2755-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Richard B. Salmon

Mailing Address 5 Hawks Rdg

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-1823-20-38

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard B. Salmon

Mailing Address 5 Hawks Rdg

City State Zip Code
Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-1814-20-38

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Richard B. Salmon

Mailing Address 5 Hawks Rdg

City State Zip Code
Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-1809-20-24

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

c. Jon L. Sandberg

Mailing Address 54 School Road

City State Zip Code
Colchester CT 06415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
Business Comm Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-22173-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jon L. Sandberg

Mailing Address 54 School Road

City State Zip Code
Colchester CT 06415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-22094-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Jon L. Sandberg

Mailing Address 54 School Road

City State Zip Code
Colchester CT 06415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-22000-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Paul A. Sanford

Mailing Address 150 W Simsbury Rd

City State Zip Code
Canton CT 06019

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Operating Effectiveness

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-7716-20-38

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)..... ►

292.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Paul A. Sanford

Mailing Address 150 W Simsbury Rd

City

Canton

State

CT

Zip Code

06019

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Operating Effectiveness

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-7690-20-38

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. Paul A. Sanford

Mailing Address 150 W Simsbury Rd

City

Canton

State

CT

Zip Code

06019

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Operating Effectiveness

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-7672-20-24

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

C. David N. Sasportas

Mailing Address 125 Wadhams Rd

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Sr Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-382-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

434.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David N. Sasportas

Mailing Address 125 Wadhams Rd

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-379-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. David N. Sasportas

Mailing Address 125 Wadhams Rd

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-378-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Frank Sataline

Mailing Address 18 Wyndham Ln

City

Farmington

State

CT

Zip Code

06032

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

SVP Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-433-20-38

Amount of Each Receipt this Period

85.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Frank Sataline

Mailing Address 18 Wyndham Ln

City State Zip Code
Farmington CT 06032

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
SVP Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-429-20-38

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Frank Sataline

Mailing Address 18 Wyndham Ln

City State Zip Code
Farmington CT 06032

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
SVP Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-428-20-24

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. David A. Savino

Mailing Address 91 Trumbull Ln

City State Zip Code
South Windsor CT 06074

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Compliance Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-594-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

195.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David A. Savino

Mailing Address 91 Trumbull Ln

City State Zip Code
 South Windsor CT 06074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Compliance Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-590-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. David A. Savino

Mailing Address 91 Trumbull Ln

City State Zip Code
 South Windsor CT 06074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Compliance Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-589-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Frederick E. Scardelletto

Mailing Address 1319 N Tulip Dr

City State Zip Code
 West Chester PA 19380

FEC ID number of contributing
federal political committee.

C

Name of Employer

INT'L REHAB. ASSOCIATES, INC.

Occupation

Provider Contracting Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-2742-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

65.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Frederick E. Scardellette

Mailing Address 1319 N Tulip Dr

City

West Chester

State

PA

Zip Code

19380

FEC ID number of contributing
federal political committee.

C

Name of Employer

INT'L REHAB. ASSOCIATES, INC.

Occupation

Provider Contracting Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-2731-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Frederick E. Scardellette

Mailing Address 1319 N Tulip Dr

City

West Chester

State

PA

Zip Code

19380

FEC ID number of contributing
federal political committee.

C

Name of Employer

INT'L REHAB. ASSOCIATES, INC.

Occupation

Provider Contracting Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-2727-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. David S. Scheibe

Mailing Address 400 Kings Highway

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Treasury Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-1320-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David S. Scheibe

Mailing Address 400 Kings Highway

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Treasury Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-1315-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. David S. Scheibe

Mailing Address 400 Kings Highway

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Treasury Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-1313-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. John E. Shepard

Mailing Address 15 Amherst Drive

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-7437-20-38

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John E. Shepard

Mailing Address 15 Amherst Drive

City State Zip Code
Cheshire CT 06410

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-7411-20-38

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. John E. Shepard

Mailing Address 15 Amherst Drive

City State Zip Code
Cheshire CT 06410

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-7393-20-24

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. Kenneth R. Silvay

Mailing Address 7 Donna Mae Lane

City State Zip Code
Tolland CT 06084

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Accounting Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-968-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

170.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kenneth R. Silvay

Mailing Address 7 Donna Mae Lane

City State Zip Code
Tolland CT 06084

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Accounting Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-963-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Kenneth R. Silvay

Mailing Address 7 Donna Mae Lane

City State Zip Code
Tolland CT 06084

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Accounting Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-962-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. Marcus D. Skipwith

Mailing Address P. O. Box 130833

City State Zip Code
Birmingham AL 35213

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-31161-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Marcus D. Skipwith

Mailing Address P. O. Box 130833

City State Zip Code
 Birmingham AL 35213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-31253-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Marcus D. Skipwith

Mailing Address P. O. Box 130833

City State Zip Code
 Birmingham AL 35213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-31263-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Jay Smith

Mailing Address 25 Carriage Drive

City State Zip Code
 Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

App Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-9851-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay Smith

Mailing Address 25 Carriage Drive

City State Zip Code
Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
App Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-9823-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Jay Smith

Mailing Address 25 Carriage Drive

City State Zip Code
Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
App Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-9801-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Raymond Smithberger

Mailing Address 15 Cold Spring Rd

City State Zip Code
Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-9919-20-38

Amount of Each Receipt this Period

19.25

SUBTOTAL of Receipts This Page (optional)..... ►

69.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Raymond Smithberger

Mailing Address 15 Cold Spring Rd

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-9891-20-38

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

B. Raymond Smithberger

Mailing Address 15 Cold Spring Rd

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-9869-20-24

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

C. Diana Sousa

Mailing Address 995 Prospect Avenue

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-19897-20-38

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

128.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Diana Sousa

Mailing Address 995 Prospect Avenue

City State Zip Code
Hartford CT 06105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-19828-20-38

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

B. Diana Sousa

Mailing Address 995 Prospect Avenue

City State Zip Code
Hartford CT 06105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-19757-20-24

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

C. Kenneth Stapleton

Mailing Address 454 Lonesome Dove Lane

City State Zip Code
Ringgold GA 30736

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-10007-20-38

Amount of Each Receipt this Period

19.25

SUBTOTAL of Receipts This Page (optional)..... ►

199.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kenneth Stapleton

Mailing Address 454 Lonesome Dove Lane

City State Zip Code
Ringgold GA 30736

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-9979-20-38

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

B. Kenneth Stapleton

Mailing Address 454 Lonesome Dove Lane

City State Zip Code
Ringgold GA 30736

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-9957-20-24

Amount of Each Receipt this Period

19.25

Full Name (Last, First, Middle Initial)

C. Jennifer Stepp

Mailing Address 4144 Central Ave

City State Zip Code
Indianapolis IN 46205

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Account Manager-National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.56

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-3833-20-38

Amount of Each Receipt this Period

14.81

SUBTOTAL of Receipts This Page (optional)..... ►

53.31

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jennifer Stepp

Mailing Address 4144 Central Ave

City State Zip Code
 Indianapolis IN 46205

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Account Manager-National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-3817-20-38

Amount of Each Receipt this Period

14.88

Full Name (Last, First, Middle Initial)

B. Jennifer Stepp

Mailing Address 4144 Central Ave

City State Zip Code
 Indianapolis IN 46205

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Account Manager-National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-3812-20-24

Amount of Each Receipt this Period

14.81

Full Name (Last, First, Middle Initial)

C. Daniel M. Sullivan

Mailing Address 1221 Beech Hollow Drive

City State Zip Code
 Nashville TN 37211

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-1525-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

44.69

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Daniel M. Sullivan

Mailing Address 1221 Beech Hollow Drive

City State Zip Code
Nashville TN 37211

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-1519-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Daniel M. Sullivan

Mailing Address 1221 Beech Hollow Drive

City State Zip Code
Nashville TN 37211

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-1517-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Gregory J. Sullivan

Mailing Address 27 Sunny Heights Rd

City State Zip Code
Granby CT 06035

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.88

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-10488-20-38

Amount of Each Receipt this Period

26.93

SUBTOTAL of Receipts This Page (optional)..... ►

56.93

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gregory J. Sullivan

Mailing Address 27 Sunny Heights Rd

City State Zip Code
 Granby CT 06035

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-10458-20-38

Amount of Each Receipt this Period

26.93

Full Name (Last, First, Middle Initial)

B. Gregory J. Sullivan

Mailing Address 27 Sunny Heights Rd

City State Zip Code
 Granby CT 06035

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-10435-20-24

Amount of Each Receipt this Period

26.93

Full Name (Last, First, Middle Initial)

C. Gerald T. Sweeney

Mailing Address 114 Woodland Drive

City State Zip Code
 Fair Haven NJ 07704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
 VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-16404-20-38

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)..... ►

245.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gerald T. Sweeney

Mailing Address 114 Woodland Drive

City

Fair Haven

State

NJ

Zip Code

07704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Information Technology

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-16353-20-38

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. Gerald T. Sweeney

Mailing Address 114 Woodland Drive

City

Fair Haven

State

NJ

Zip Code

07704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Information Technology

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-16303-20-24

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

C. Paul C. Sweeney

Mailing Address 46 Round Hill Road

City

Kingston

State

MA

Zip Code

02364

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-12916-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

399.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Paul C. Sweeney

Mailing Address 46 Round Hill Road

City State Zip Code
 Kingston MA 02364

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-12878-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Paul C. Sweeney

Mailing Address 46 Round Hill Road

City State Zip Code
 Kingston MA 02364

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-12847-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

c. Shelly Swinford

Mailing Address 5 Pinnacle Mountain Rd

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.11

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-3815-20-38

Amount of Each Receipt this Period

18.53

SUBTOTAL of Receipts This Page (optional)..... ►

48.53

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Shelly Swinford

Mailing Address 5 Pinnacle Mountain Rd

City State Zip Code
Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.11

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-3799-20-38

Amount of Each Receipt this Period

18.59

Full Name (Last, First, Middle Initial)

B. Shelly Swinford

Mailing Address 5 Pinnacle Mountain Rd

City State Zip Code
Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.11

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-3794-20-24

Amount of Each Receipt this Period

18.53

Full Name (Last, First, Middle Initial)

c. Jan C. Sykes

Mailing Address 803 W. Mesquite

City State Zip Code
Phoenix AZ 85086

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna HEALTHCARE OF AZ, INC

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-8021-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

87.12

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jan C. Sykes

Mailing Address 803 W. Mesquite

City State Zip Code
 Phoenix AZ 85086

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna HEALTHCARE OF AZ, INC

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-7995-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Jan C. Sykes

Mailing Address 803 W. Mesquite

City State Zip Code
 Phoenix AZ 85086

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna HEALTHCARE OF AZ, INC

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-7976-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Doryne Thomas

Mailing Address 2224 Longwood Dr

City State Zip Code
 Carrollton TX 75010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AMERICA

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-9884-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Doryne Thomas

Mailing Address 2224 Longwood Dr

City State Zip Code
 Carrollton TX 75010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AMERICA

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-9856-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Doryne Thomas

Mailing Address 2224 Longwood Dr

City State Zip Code
 Carrollton TX 75010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AMERICA

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-9834-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Stephen M. Thomas

Mailing Address 12 Farnsworth Dr

City State Zip Code
 New Hartford CT 06057

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-754-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Stephen M. Thomas

Mailing Address 12 Farnsworth Dr

City State Zip Code
 New Hartford CT 06057

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-749-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Stephen M. Thomas

Mailing Address 12 Farnsworth Dr

City State Zip Code
 New Hartford CT 06057

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-748-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Jeffrey E. Tindall

Mailing Address 47 Owens Brook Blvd

City State Zip Code
 Simsbury CT 06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
 Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-10673-20-38

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeffrey E. Tindall

Mailing Address 47 Owens Brook Blvd

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-10643-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Jeffrey E. Tindall

Mailing Address 47 Owens Brook Blvd

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-10620-20-24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Rhonda L. Toole

Mailing Address 5556 Indigo Fields Blvd

City

North Charleston

State

SC

Zip Code

29418

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Segment Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-3345-20-38

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rhonda L. Toole

Mailing Address 5556 Indigo Fields Blvd

City State Zip Code
 North Charleston SC 29418

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Segment Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-3333-20-38

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Rhonda L. Toole

Mailing Address 5556 Indigo Fields Blvd

City State Zip Code
 North Charleston SC 29418

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Segment Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-3329-20-24

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

c. Michael W. Triplett

Mailing Address 2411 Littlecote Ln

City State Zip Code
 Richmond VA 23236

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-683-20-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

130.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael W. Triplett

Mailing Address 2411 Littlecote Ln

City State Zip Code
Richmond VA 23236

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-678-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Michael W. Triplett

Mailing Address 2411 Littlecote Ln

City State Zip Code
Richmond VA 23236

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-676-20-24

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Julie A. Vayer

Mailing Address 15 Woodside Circle

City State Zip Code
Hartford CT 06105

FEC ID number of contributing federal political committee.

C

Name of Employer
Cigna BEHAVIORAL HEALTH, INC.

Occupation
VP Total Health & Network Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-7654-20-38

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

275.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Julie A. Vayer

Mailing Address 15 Woodside Circle

City State Zip Code
Hartford CT 06105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna BEHAVIORAL HEALTH, INC.

Occupation
VP Total Health & Network Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-7628-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Julie A. Vayer

Mailing Address 15 Woodside Circle

City State Zip Code
Hartford CT 06105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna BEHAVIORAL HEALTH, INC.

Occupation
VP Total Health & Network Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-7610-20-24

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Jennifer L. Velasquez

Mailing Address 5758 Pine Tree Drive

City State Zip Code
Miami Beach FL 33140

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
App Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-31732-20-38

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jennifer L. Velasquez

Mailing Address 5758 Pine Tree Drive

City

Miami Beach

State

FL

Zip Code

33140

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : 20140714-31822-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Jennifer L. Velasquez

Mailing Address 5758 Pine Tree Drive

City

Miami Beach

State

FL

Zip Code

33140

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : 20140728-31826-20-24

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Martha I. Vinas

Mailing Address 5304 Fishhawk Ridge Drive

City

Lithia

State

FL

Zip Code

33547

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Project Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : 20140630-21120-20-38

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Martha I. Vinas

Mailing Address 5304 Fishhawk Ridge Drive

City State Zip Code
 Lithia FL 33547

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Project Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-21041-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Martha I. Vinas

Mailing Address 5304 Fishhawk Ridge Drive

City State Zip Code
 Lithia FL 33547

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Project Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-20952-20-24

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Brian Wallach

Mailing Address 777 Dunlavy Street, Apt. 8104

City State Zip Code
 Houston TX 77019

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Provider Contracting Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-6837-20-38

Amount of Each Receipt this Period

29.93

SUBTOTAL of Receipts This Page (optional)..... ►

79.93

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Patricia J. Walsh

Mailing Address 88 Bancroft Rd

City State Zip Code
 Northampton MA 01060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-19827-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Patricia J. Walsh

Mailing Address 88 Bancroft Rd

City State Zip Code
 Northampton MA 01060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-19759-20-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Patricia J. Walsh

Mailing Address 88 Bancroft Rd

City State Zip Code
 Northampton MA 01060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-19688-20-24

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Justin J. Warrington

Mailing Address 25 Longwood Dr

City State Zip Code
 Stratford NJ 08084

FEC ID number of contributing
federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AMERICA

Occupation
 Financial Strategy Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-2130-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Justin J. Warrington

Mailing Address 25 Longwood Dr

City State Zip Code
 Stratford NJ 08084

FEC ID number of contributing
federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AMERICA

Occupation
 Financial Strategy Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-2120-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Justin J. Warrington

Mailing Address 25 Longwood Dr

City State Zip Code
 Stratford NJ 08084

FEC ID number of contributing
federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AMERICA

Occupation
 Financial Strategy Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-2115-20-24

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Philip J. Wasden

Mailing Address 300 Big Bend Trail

City State Zip Code
 Sugar Hill GA 30518

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CIGNA HEALTHCARE OF GA, INC.

Occupation
 Manager Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-4927-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Philip J. Wasden

Mailing Address 300 Big Bend Trail

City State Zip Code
 Sugar Hill GA 30518

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CIGNA HEALTHCARE OF GA, INC.

Occupation
 Manager Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-4908-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Philip J. Wasden

Mailing Address 300 Big Bend Trail

City State Zip Code
 Sugar Hill GA 30518

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CIGNA HEALTHCARE OF GA, INC.

Occupation
 Manager Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-4899-20-24

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eric E. Wawrzon

Mailing Address 2123 Sister Court

City

Nolensville

State

TN

Zip Code

37135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Technical Support Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-31946-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Eric E. Wawrzon

Mailing Address 2123 Sister Court

City

Nolensville

State

TN

Zip Code

37135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Technical Support Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-32032-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Eric E. Wawrzon

Mailing Address 2123 Sister Court

City

Nolensville

State

TN

Zip Code

37135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Technical Support Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-32036-20-24

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Peter B. Welch

Mailing Address 48 Tampa Drive

City State Zip Code
 San Rafael CA 94901

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-7440-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Peter B. Welch

Mailing Address 48 Tampa Drive

City State Zip Code
 San Rafael CA 94901

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-7414-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Peter B. Welch

Mailing Address 48 Tampa Drive

City State Zip Code
 San Rafael CA 94901

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-7396-20-24

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. William M. Welch

Mailing Address 25 Meadowbrook Road

City State Zip Code
 Longmeadow MA 01106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-22186-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. William M. Welch

Mailing Address 25 Meadowbrook Road

City State Zip Code
 Longmeadow MA 01106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-22108-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. William M. Welch

Mailing Address 25 Meadowbrook Road

City State Zip Code
 Longmeadow MA 01106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-22013-20-24

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jennifer L. Wheatley

Mailing Address 14102 Lexington Drive

City State Zip Code
Parker CO 80134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-15615-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Jennifer L. Wheatley

Mailing Address 14102 Lexington Drive

City State Zip Code
Parker CO 80134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-15565-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Jennifer L. Wheatley

Mailing Address 14102 Lexington Drive

City State Zip Code
Parker CO 80134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-15519-20-24

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Christopher J. Whelan

Mailing Address 585 Country Club Rd

City State Zip Code
 Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-10320-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Christopher J. Whelan

Mailing Address 585 Country Club Rd

City State Zip Code
 Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-10290-20-38

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

c. Christopher J. Whelan

Mailing Address 585 Country Club Rd

City State Zip Code
 Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-10267-20-24

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Reginald White

Mailing Address 625 Abbotts View Ct

City State Zip Code
Duluth GA 30097

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-10958-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Reginald White

Mailing Address 625 Abbotts View Ct

City State Zip Code
Duluth GA 30097

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-10927-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Reginald White

Mailing Address 625 Abbotts View Ct

City State Zip Code
Duluth GA 30097

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-10904-20-24

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lance Wilkes

Mailing Address 85 Tyler Court

City State Zip Code
 Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Financial Strategy Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : 20140630-7638-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Lance Wilkes

Mailing Address 85 Tyler Court

City State Zip Code
 Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Financial Strategy Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : 20140714-7612-20-38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Lance Wilkes

Mailing Address 85 Tyler Court

City State Zip Code
 Avon CT 06001

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Financial Strategy Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : 20140728-7594-20-24

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Diane M. Wilkosz

Mailing Address 2065 Iowa Ave. NE

City State Zip Code
 St. Petersburg FL 33703

FEC ID number of contributing federal political committee.

C

Name of Employer

CIGNA HEALTHCARE OF FL, INC

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-1874-20-38

Amount of Each Receipt this Period

74.00

Full Name (Last, First, Middle Initial)

B. Diane M. Wilkosz

Mailing Address 2065 Iowa Ave. NE

City State Zip Code
 St. Petersburg FL 33703

FEC ID number of contributing federal political committee.

C

Name of Employer

CIGNA HEALTHCARE OF FL, INC

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-1865-20-38

Amount of Each Receipt this Period

74.00

Full Name (Last, First, Middle Initial)

C. Diane M. Wilkosz

Mailing Address 2065 Iowa Ave. NE

City State Zip Code
 St. Petersburg FL 33703

FEC ID number of contributing federal political committee.

C

Name of Employer

CIGNA HEALTHCARE OF FL, INC

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-1860-20-24

Amount of Each Receipt this Period

74.00

SUBTOTAL of Receipts This Page (optional)..... ►

222.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Daniel Wiss

Mailing Address 6925 Columbia Avenue

City State Zip Code
 University City MO 63130

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : 20140630-8854-20-38

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Daniel Wiss

Mailing Address 6925 Columbia Avenue

City State Zip Code
 University City MO 63130

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 17 2014

Transaction ID : 20140714-8829-20-38

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Daniel Wiss

Mailing Address 6925 Columbia Avenue

City State Zip Code
 University City MO 63130

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : 20140728-8806-20-24

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bradley A. Wolfram

Mailing Address 1405 High Lonesome

City

Leander

State

TX

Zip Code

78641-3660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 03 / 2014

Transaction ID : 20140630-32364-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Bradley A. Wolfram

Mailing Address 1405 High Lonesome

City

Leander

State

TX

Zip Code

78641-3660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 17 / 2014

Transaction ID : 20140714-32447-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Bradley A. Wolfram

Mailing Address 1405 High Lonesome

City

Leander

State

TX

Zip Code

78641-3660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

07 / 31 / 2014

Transaction ID : 20140728-32447-20-24

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John M. Wray

Mailing Address 118 West 79th Street

City State Zip Code
New York NY 10024

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Network Delivery Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 03 2014

Transaction ID : 20140630-23122-20-38

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

B. John M. Wray

Mailing Address 118 West 79th Street

City State Zip Code
New York NY 10024

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Network Delivery Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 17 2014

Transaction ID : 20140714-23045-20-38

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

c. John M. Wray

Mailing Address 118 West 79th Street

City State Zip Code
New York NY 10024

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Network Delivery Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 31 2014

Transaction ID : 20140728-22938-20-24

Amount of Each Receipt this Period

175.00

SUBTOTAL of Receipts This Page (optional)..... ►

525.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 228 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bu Yang

Mailing Address 121 High Wood Dr

City State Zip Code
South Glastonbury CT 06073

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-7390-20-38

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

B. Bu Yang

Mailing Address 121 High Wood Dr

City State Zip Code
South Glastonbury CT 06073

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-7364-20-38

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

C. Bu Yang

Mailing Address 121 High Wood Dr

City State Zip Code
South Glastonbury CT 06073

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-7346-20-24

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)..... ►

165.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 229 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John Yardley

Mailing Address 240 Rockwood Drive

City

Southington

State

CT

Zip Code

06489

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Technical Support Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-21416-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. John Yardley

Mailing Address 240 Rockwood Drive

City

Southington

State

CT

Zip Code

06489

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Technical Support Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-21337-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. John Yardley

Mailing Address 240 Rockwood Drive

City

Southington

State

CT

Zip Code

06489

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Technical Support Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-21244-20-24

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 230 OF 241
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeffrey Young

Mailing Address 1241 Old Turnpike Rd

City State Zip Code
 Oakham MA 01068

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Informatics/Analytics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : 20140630-299-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Jeffrey Young

Mailing Address 1241 Old Turnpike Rd

City State Zip Code
 Oakham MA 01068

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Informatics/Analytics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
 07 / 17 / 2014

Transaction ID : 20140714-297-20-38

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Jeffrey Young

Mailing Address 1241 Old Turnpike Rd

City State Zip Code
 Oakham MA 01068

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Informatics/Analytics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
 07 / 31 / 2014

Transaction ID : 20140728-297-20-24

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 231 OF 241

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David G. Zach

Mailing Address 9 Heritage Lane

City

Phoenixville

State

PA

Zip Code

19460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-25574-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. David G. Zach

Mailing Address 9 Heritage Lane

City

Phoenixville

State

PA

Zip Code

19460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-25494-20-38

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. David G. Zach

Mailing Address 9 Heritage Lane

City

Phoenixville

State

PA

Zip Code

19460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-25363-20-24

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 232 OF 241

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. George Zaruba

Mailing Address 17 Ashford Lane

City State Zip Code
Newtown CT 06470

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2464.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : 20140630-23694-20-38

Amount of Each Receipt this Period

154.00

Full Name (Last, First, Middle Initial)

B. George Zaruba

Mailing Address 17 Ashford Lane

City State Zip Code
Newtown CT 06470

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2464.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2014

Transaction ID : 20140714-23618-20-38

Amount of Each Receipt this Period

154.00

Full Name (Last, First, Middle Initial)

C. George Zaruba

Mailing Address 17 Ashford Lane

City State Zip Code
Newtown CT 06470

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2464.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 20140728-23505-20-24

Amount of Each Receipt this Period

154.00

SUBTOTAL of Receipts This Page (optional)..... ►

462.00

TOTAL This Period (last page this line number only)..... ►

37075.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 233 OF 241

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Charles Boustany Jr. MD for Congress, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Mailing Address PO Box 80126

Transaction ID : DE40CD3ABACFB735B5D

City Lafayette	State LA	Zip Code 70598-0126
-------------------	-------------	------------------------

Amount of Each Disbursement this Period

Purpose of Disbursement
2014 Primary

011

2500.00

Candidate Name

Charles W. Boustany Jr.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 03

Full Name (Last, First, Middle Initial)

B. Democratic Congressional Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Mailing Address 430 South Capitol Street, SE
2nd Floor**Transaction ID : 2C5D41FF14CD01EA5B3**

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

Amount of Each Disbursement this Period

Purpose of Disbursement
2014 Contribution

011

5000.00

Candidate Name

Democratic Congressional Campaign CommitteeCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
Contribution

State: District:

Full Name (Last, First, Middle Initial)

C. Denny Heck for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Mailing Address PO Box 235

Transaction ID : 4EA05714523E4BFF1FC

City Olympia	State WA	Zip Code 98507
-----------------	-------------	-------------------

Amount of Each Disbursement this Period

Purpose of Disbursement
2014 Primary

011

1000.00

Candidate Name

Dennis HeckCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 10

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 234 OF 241

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Devin Nunes Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Mailing Address PO Box 6545

Transaction ID : 269956F2BB82B0D53BB

City	State	Zip Code
Visalia	CA	93290-6545

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Devin G. NunesOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 22

Full Name (Last, First, Middle Initial)

B. Freedom Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Mailing Address 701 8th Street, NW
Suite 500**Transaction ID : 6574500DDB2DF0A1262**

City	State	Zip Code
Washington	DC	20001

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
2014 Contribution

011

Category/
Type

Candidate Name

Freedom FundOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
Contribution

State: District:

Full Name (Last, First, Middle Initial)

C. Freedom Project, The

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Mailing Address 320 1st Street SE

Transaction ID : 86749EB17ACD68ECE03

City	State	Zip Code
Washington	DC	20003

Amount of Each Disbursement this Period

1250.00

Purpose of Disbursement
2014 Contribution

011

Category/
Type

Candidate Name

Freedom Project, TheOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
Contribution

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 235 OF 241

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Erik PaulsenMailing Address PO Box 44369
250 Prairie Center Drive

City Eden Prairie State MN Zip Code 55344

Purpose of Disbursement
2014 Primary

Candidate Name

Erik PaulsenOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : EFD0D0AD8766173EB4B

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Friends of John BoehnerMailing Address 7908 Cincinnati Dayton Road
Suite I

City West Chester State OH Zip Code 45069-6628

Purpose of Disbursement
2014 General

Candidate Name

John A. BoehnerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : 51FE7CA2D7EADBF5B36

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

C. Friends of Patrick Murphy

Mailing Address 4521 Pga Blvd. #412

City Palm Beach Gardens State FL Zip Code 33418

Purpose of Disbursement
2014 Primary

Candidate Name

Patrick E. MurphyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : FE02923CB7832B1E58B

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5250.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 236 OF 241

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Roy Blunt

Mailing Address PO Box 10178

City Columbia	State MO	Zip Code 65205-4002
------------------	-------------	------------------------

Purpose of Disbursement
2016 Primary

011

Candidate Name

Roy D. BluntOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : 0FF512A8FB1921FA8F7

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Lynn Jenkins for Congress

Mailing Address PO Box 1441

City Topeka	State KS	Zip Code 66601-1441
----------------	-------------	------------------------

Purpose of Disbursement
2014 Primary

011

Candidate Name

Lynn JenkinsOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : 83F487ECCE9995D82FC

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Pallone for Congress

Mailing Address PO Box 3176

City Long Branch	State NJ	Zip Code 07740
---------------------	-------------	-------------------

Purpose of Disbursement
2014 General

011

Candidate Name

Frank Pallone Jr.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : 3D7CFA082D7039D3030

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 237 OF 241

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pat Meehan for Congress

Mailing Address 50 S. Providence Road

City Media	State PA	Zip Code 19063
---------------	-------------	-------------------

Purpose of Disbursement
2014 General

011

Candidate Name

Patrick L. MeehanCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : 8F9C76BB10BFC769896

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Scalise for Congress

Mailing Address PO Box 23219

City Jefferson	State LA	Zip Code 70183-3219
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Purpose of Disbursement
2014 Primary

011

Candidate Name

Stephen J. ScaliseCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : 0AA006A1E5973BD8641

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Volunteers for Shimkus

Mailing Address PO Box 661

City Collinsville	State IL	Zip Code 62234-0661
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Purpose of Disbursement
2014 General

011

Candidate Name

John M. ShimkusCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : 7D0C7B6E055A8B4ED49

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5500.00

33000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 238 OF 241

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Committee to Elect Jeff Tarte

Mailing Address 19825 B North Cove Rd., Suite 114

City	State	Zip Code
Cornelius	NC	28031

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : 570565B279E1035D2C0

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

B. Committee to Elect Marilyn Avila

Mailing Address 11312 Derby Lane

City	State	Zip Code
Raleigh	NC	27613

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : D86CC8E0D5EBB776D72

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

C. David Lewis for House

Mailing Address PO Box 1826

City	State	Zip Code
Dunn	NC	28335

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : E5C2FE2E718D4137229

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1200.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 239 OF 241

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dollar for House

Mailing Address PO Box 1352

City	State	Zip Code
Cary	NC	27512

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : BD54B0550ABEDA3C805

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

B. Friends of Tim Moore

Mailing Address 305 E Kings St

City	State	Zip Code
Kings Mountain	NC	28086

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : FB6882BC58760644CFC

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

C. Hall for House District 29

Mailing Address PO Box 25308

City	State	Zip Code
Durham	NC	27702-5308

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : 07CD04DC61F7C8EE378

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1300.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Harry J. Warren for NC 77

Mailing Address 201 Kingsbridge Road

City	State	Zip Code
Salisbury	NC	28144

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : 44E6EC73CE4736CF8A9

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

B. Justin Burr for NC House

Mailing Address PO Box 1966

City	State	Zip Code
Albemarle	NC	28002

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : 7FB0B04EBB501634724

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

C. Ralph Hise for NC Senate

Mailing Address PO Box 86

City	State	Zip Code
Spruce Pine	NC	28777

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Transaction ID : 247CB41D8D802913452

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1300.00

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	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

Cigna Corporation Political Action Committee

-500.00

500.00

3800.00